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# **TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT (LEAFS) PROJECT**

**TENNESSEE SHERIFF'S ASSOCIATION**

185888 (20155)



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### *SUMMARY INTRODUCTION*

The Tennessee Sheriffs' Association, Inc. was awarded a Grant to "develop, demonstrate and test innovative stress-reduction and support programs for State or local law enforcement personnel and their families." With the support of the National Institute of Justice, the Tennessee Sheriffs' Association, worked in partnership with the University of Tennessee and the Tennessee Law Enforcement Training Academy located in Nashville, Walters State Community College in Morristown, TN and the National Office of the Concerns of Police Survivors. Over an 18-month program, we developed a framework of stress-related services on a statewide basis for law enforcement personnel and their families. The services cover a range of activities from on-scene defusings to group therapy for families, children and couples. Its focus is the early recognition and provision of services, which preserves confidentiality while utilizing extensive peer support. Services were developed and implemented in conjunction with the provisions of health insurance and the development of a dialogue with service provider networks. In this respect, a model of services needed for effective support of the law enforcement community was established.

The program implemented a model for a stress reduction program at regional law enforcement training academies, and produced a text/workbook for educating new recruits and their families on stress related topics. This text/workbook will be made available for use with other jurisdictions or states. In addition, this program incorporated a monitoring and evaluation component, utilizing a design that attempted to test the efficacy of services provided to law enforcement personnel and their families.

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The Tennessee Sheriffs' Association, representing all 95 counties of the State of Tennessee committed to address the complex issues of stress management and treatment among law enforcement personnel and their families. We recognize that often police officer's families are the forgotten victims of crime. This effort included an initiative in conjunction with the National Office of the Concerns of Police Survivors to develop a local chapter, which is prepared to address issues on line of duty death among law enforcement personnel. The groundwork has been laid, but not yet completed. Meeting some of the requirements necessary to qualify to be recognized for a C.O.P.S. Chapter were difficult to obtain within the Grant Period.

Law enforcement officers are required to complete 40 hours of in-service training annually. The Law Enforcement Satellite Academy Training (L.E.S.A.T.), through the University of Tennessee, provides structured video-taped training classes that are completed at the individual agencies who subscribe to this service. One of the classes was titled, "Critical Incident and Stress Management". A copy of this Videotape has already been provided to Mr. Talucci at N.I.J. There are also plans to present this training nationwide, with the approval of the National Institute of Justice.

In early 1998, officers in the state of Tennessee were surveyed to identify the number and type of critical incidents they have experienced in their career. This "survey" served as the "baseline" for the evaluation. The law enforcement agencies involved were chosen by methodology explained in the Program Evaluation. As part of this baseline survey, officers identified their knowledge of existing services available to them and their family members to deal with job-related stress, as well as their use and perceived willingness to use these services.

In addition, this program developed intervention strategies to be delivered to officers who have experienced a critical incident. Interventions developed included:

- Critical Incident Stress Debriefing (CISD) for Officers
- Critical Incident Stress Debriefing for Family Members
- Peer Support for Officers
- Peer Support for Family Members
- Shoot Teams for Officers
- Shoot Teams for Family Members

There was no organized response to critical incidents on a statewide basis at the outset of this program. There are now 26 "Team Leaders" who are trained for Peer Support in Critical Incident Stress Debriefing, who are contacted by Program staff upon receipt of a request for assistance. There are over ninety (90) L.E.A.F.S.-trained CISD personnel, and while access and availability for response are often limited and geographically scarce, the interest in this program has often found officers traveling many miles and out of their respective regions.

As the following diagram illustrates, each region had interventions available with different additional services in each region for officers who have experienced a critical incident on the job. However, comparisons for the final report were only made between two of the three regions. West Tennessee did not report or request assistance for incidents. One referral was made to a Mental Health professional, but no follow-up was returned to our office.

<b>West</b>	<b>Middle</b>	<b>East</b>
<b>Survey</b>  <b>Contact for Assistance:</b> 1-800 number Command Staff Training  <b>Officer Intervention:</b> CISD for Officers    <b>Data Collection:</b> Pre-test Post-test	<b>Survey</b>  <b>Contact for Assistance:</b> 1-800 number 1-800 number for family Command Staff Training  <b>Officer Intervention:</b> CISD for Officers Peer Support for Officers Shoot Team for Officers  <b>Family Intervention:</b> CISD for Family Members Peer Support for Family Shoot Team for Family  <b>Data Collection:</b> Pre-test Post-test	<b>Survey</b>  <b>Contact for Assistance:</b> 1-800 number Command Staff Training  <b>Officer Intervention:</b> CISD for Officers  Peer Support for Officers Shoot Team for Officers  <b>Data Collection:</b> Pre-test Post-test

In each region, Command Staff training was presented and two 1-800 numbers were implemented. Command staff training and the 800 numbers provide administrators, officers and family members in each region a means to contact the Sheriff's Association to provide assistance to officers who have experienced a critical incident.

In each region pre-test and post-test information were collected from officers who experienced a job related critical incident. Surveys completed concerning Peer Support included response from "Shoot Teams". Also, a program was started using an existing Mental Health facility for Family Support. A report on Family Support and the training for expansion of services is included in this package.

During the period over which these interventions were utilized, the following was observed by the training coordinator, facilitators and/or discussed with the program manager:

1. *The simple knowledge that assistance is available from peers had a somewhat "calming" effect, and helped create bonds between officers who may have otherwise not come into contact with each other.*
2. *Officers who received CISD and peer support after being involved in a critical incident appeared to experience less severe symptoms following debriefing.*
3. *Family members of officers who experienced a job related critical incident and participated in a family support program reported that they were more willing to use available support services.*
4. *Officers and family members who participated in an intervention program after experiencing a critical incident had a very favorable attitude toward programs such as the peer-driven L.E.A.F.S. program.*

#### **A. Baseline study**

A baseline survey was developed and distributed to officers in a randomly selected number of departments from each of the three regions. The agencies from each region were matched based on demographics such as number of sworn officers.

#### **B. Training (Appendix H contains in-depth information and evaluations)**

##### **Command Staff Training**

Training was offered to command staff of all police agencies in Tennessee. The purpose of this training was to explain the purpose of the program, in effort to gain support from command staff of the various agencies and explain how to access assistance for an officer who has experienced a critical incident. This helped educate Command Staff on symptoms of stress related to job performance and understand the importance of responding with intervention in a timely manner.

##### **Critical Incident Stress Management**

In each of the three (3) geographical regions, provisions for Critical Incident Stress Debriefing (CISD) were developed. For each region, trained personnel consisted of ten Mental Health Professionals and 30 officers. The CISD provides critical incident debriefing to officers who experience a critical incident. The team in the middle region of the State will also provide critical incident management information to officers' family members. Team members received training in critical incident management techniques.

## **Peer Support**

In the Middle and Eastern regions, Peer Support Teams were developed. The team consists of 10 members who are officers in the Eastern Region and 10 members who are officers in the Middle Region, many of whom had family members who received training for the Family Support Team. Peer team members were trained in interpersonal and intervention techniques. Areas to be covered include death/injury notification to family, communication skills, substance abuse, domestic violence, knowledge of referral process to mental health professionals, their roles and limits of their role.

## **Family Support**

At the outset, family members of officers who had been involved in Critical Incidents were invited to participate and be trained to serve on the Family Support team in Middle Tennessee. Meetings were scheduled on a weekly basis. Qualified professionals in the field presented training, when available, for the scheduled meeting, and a 3-day session was provided for these participants. Spouses were invited on the last day of training.

The Family Support group members who have participated in Critical Incident response have been especially appreciated by families of officers who were hospitalized due to an incident, and the hospitals in Middle Tennessee have been extremely cooperative and helpful.

Some of the participants have continued to meet on a bi-weekly basis, in an effort to maintain cohesiveness within the group. Further training directly related to response will be provided at a later date, following funding approval. There is a great need for expansion into all three regions of the state of Tennessee, and continued Academy training. At the present time, 24 hours of training is included in the Basic Police school curriculum for Stress Inoculation and Family issues at two (2) of the 8 Basic Academies, one of which is the state law enforcement academy.

Additional training for mental health professionals was provided to expose them to scenarios that were typical of incidents where an officer might require intervention. Titled "Guidelines for Involvement of Mental Health Professionals at Crime Scenes", this training was conducted by Sgt. Randy Tedford, Oak Ridge Police Department, who also serves as a "team leader" for L.E.A.F.S. The sessions were three (3) hours in length, and held once in each of the three (3) regions of Tennessee. Copies of the evaluations received from the attendees are included.

## **C. Training Evaluation**

All training provided was evaluated based on two levels of criteria; reaction and learning. Measurement of reaction will identify what the trainees thought of the training they received. Measurement of learning will focus on the acquisition of principles, facts, techniques, and attitudes that were specified as training objectives. Identical forms were used to assess each instructor, and subject matter covered, for the C.I.S.D., Peer Support and Family Support training.

## **D. Shoot Teams**

Shoot Teams are made up of officers who in the past have been involved in critical incidents who come together with officers newly exposed to a critical incident. They form small group discussions, usually most effective in groups of 12-15. A Mental Health Professional (trained or referred by L.E.A.F.S.) is present to insure confidentiality standards due to present Tennessee law. Peer driven, this allows officers, in safety, to share feelings and emotions experience as a result of a critical incident. Team Leaders in East Tennessee and in Middle Tennessee have begun setting up and facilitating their own "Teams". Due to many factors, an officer may feel more comfortable outside of their geographical region, and may attend a "Shoot Team" in another region. The "motto" we use is "*what is said here, stays here*".

"Shoot" teams have also been held for female officers and CISD Team members. As the original meetings increased, more females became involved, and it was felt that it would be beneficial to provide this time for them.

## **Data Collection Notes**

Post-test measurements were taken at two-weeks and again after three months following the initial debriefing. Also at the three-month period, officers were asked to rate their perception of the services they have received. The information collected was identical to information collected in the pre-test. The officers who were most directly in contact with the critical incident were more likely to respond to the questions on the survey forms each time they participated in the program. There was difficulty in getting officers together for the two-week, and even greater difficulty with the three-month surveys. Often, officers had changed shifts and being an election year, Tennessee lost 35 of the original 95 (pre-Grant period) sheriffs. Many of the newly elected Sheriffs had no knowledge of the L.E.A.F.S. program, and there were many personnel changes, which hampered participation.

The following organizational objectives were met as proposed:

- 1) Development of 120-member CISD team to provide services as outlined
- 2) Development of a family support team providing services as outlined
- 3) Creation of a 24 hour crisis hotline for law enforcement personnel
- 4) Creation of a 24 hour statewide 800 number for family support
- 5) Provision of on-scene defusing services, in areas where a "Team Leader" was available
- 6) Provision of post-shooting debriefing services
- 7) Proactive education and support for recruits and family members
- 8) Hypertension clinics made available within reasonable distance for officers in East, Middle and West Tennessee
- 9) Product goal: Textbook/workbook - Located in Front inside cover

*Bill Thomas*  
*Executive Director*

June 1, 1998

Chief Jackie R. Moore  
Franklin Police Dept.  
P. O. Box 421  
Franklin, TN 37065

Dear Chief Moore:

The National Institute of Justice has awarded the Tennessee Sheriffs' Association a grant through the Law Enforcement and Family Support demonstration project. This grant #97-FS-VX-0005 will fund an eighteen month research study for all law enforcement officers in Tennessee. This is the largest grant ever awarded in their history for this type of research. The state of Tennessee now has the opportunity to make law enforcement history in that we can develop a model stress reduction program for officers when they become involved in a critical incident and need assistance.

Your agency has been selected as being representative of the law enforcement agencies in Tennessee. Out of the 394 city, county, and state agencies in Tennessee, eighty-one (81) agencies have been selected. In East Tennessee, twenty-six (26) were selected; Middle Tennessee has twenty-eight (28) agencies; and West Tennessee has twenty-seven (27) agencies. These eighty-one (81) agencies have approximately 4,023 officers to be surveyed.

I respectfully request that you assign one police officer from your agency to conduct this survey. This officer is to attend a meeting at the Tennessee Law Enforcement Training Academy in Donelson, Tennessee on the 10 June 1998, at 1:00 PM. At this meeting, your officer will be instructed on how to conduct this survey at your agency. The meeting will be completed in about two (2) hours. The forms will be given to your officer to follow up with.

Each sworn officer in your department is to complete a form. It should take approximately 20 minutes to fill out the survey. The forms will then be mailed out in a pre-addressed envelope to be delivered to the computer programmer. The Tennessee Sheriffs' Association will furnish the form and envelopes.

Sincerely,

Bill Thomas  
Executive Director

## **Program Evaluation**

### **I. Overview**

As part of the Tennessee Law Enforcement Family Support Demonstration Project, a series of evaluation studies were performed to attempt to identify the impact of the project on officers and their family members throughout the State. The following summarizes the procedures used to conduct each evaluation and the results obtained. The three studies include:

1. Baseline Study.
2. Critical Incident Stress Debriefing (C.I.S.D.) Study.
3. Evaluation of C.I.S.D., Peer and Family Teams.

### **A. Research Model**

To identify the effect of various assistance programs and the programs' impact on the awareness of services, willingness to use services and ability to assist officers and family members with critical incidents, the State of Tennessee was divided into three regions (i.e. East, Middle, West).

All regions received the same baseline questionnaire. Each region, however, received different interventions to assist officers and family members with job related critical incidents. From a design point of view, it would have been beneficial for one region not to receive any assistance for critical incidents. This region would then have served as a control group for comparison to the other regions that received interventions. The decision was made that if the resource was available it should be made available to all officers in the State. This would prevent any possible harm to officers who had experienced a job related critical incident.

As a result, the Western region was to receive only Critical Incident Stress Debriefing (CISD); the Eastern region would receive CISD, and Peer Support; the Middle region would receive CISD, Peer Support, and Family Support.

<b>West</b>	<b>Middle</b>	<b>East</b>
CISD only	CISD Peer Support Family Support	CISD Peer Support

Comparisons could then be made to determine if the different activities that took place in each region to develop, advertise and implement these services had an impact on awareness, willingness to use services, and minimizing the effects of job related critical incidents.

## **II. Baseline Study, Time1 and Time2**

The goal of the baseline study was to identify, on a State level, officers' awareness and willingness to use services. A secondary goal was to identify the extent to which officers had experienced job related critical incidents and symptoms of posttraumatic stress disorder. Finally, the baseline study was to be repeated to identify if the program initiated on a State level altered officers' awareness and willingness to use services.

The baseline questionnaire was distributed twice during the course of this project. To distinguish between the two distributions of the baseline questionnaire, Time1 will be used to identify the first baseline questionnaire, which was distributed prior to the initiation of any training program or use of CISD, Peer or Family Teams. Time2 will be used to identify the questionnaire that was distributed a second time at the completion of the project.

It must be noted that while a goal in distributing the baseline questionnaires was to identify changes in awareness and utilization, caution must be taken in comparing the results obtained from the distribution of the two questionnaires. While attempts were made to ensure that the sample which completed the questionnaire both times was the same, this was not achieved. This was due in part to changes in administration of participating agencies and changes in cooperation of departments. Also the inability to match participants' responses on Time1 and Time2 was due to steps taken to ensure the anonymity of participants which was an important concern of agencies and participants. These issues are presented in more detail in the following sections

#### **A. Method**

##### **1. Participants, Time1 and Time2**

The first baseline questionnaire, Time1 was distributed to 4,036 law enforcement officers throughout the State of Tennessee. A total of 3,061 questionnaires were returned resulting in a response rate of 75.8%. Questionnaire Time2 was distributed to 3,519 officers. A total of 2,364 were returned resulting in a response rate of 67.2%. To provide an adequate representation of the Tennessee's Law Enforcement, City, County and State Agencies were randomly selected from the eastern, middle and western regions of the State (See Table 1).

The average age of participants in Time1 was 37.8 (SD=10.11, n=2,943) with an average of 12.53 years of service (SD=9.08, n=2,648). For Time2 the average age of participants was 37.80 (SD=9.56, n=2,272) with an average of 12.76 years of service (SD= 9.21, n=2,268). Additional demographic information for participants in Time1 and Time2 is presented in Table 2. The trends in the demographics of respondents from both

samples are similar. For both groups the majority of respondents were white males who had some college experience. The majority of respondents' job duties were patrol. Sergeant was the most common rank recorded and a little more than a third of respondents in both samples had experienced active duty in the military. The overwhelming majority of respondents were currently married (Time1, 73.2%; Time2, 73.8%). A little more than a third of respondents from both samples reported two or more marriages (Time, 31%, Time2, 32.9%). In both samples the majority of respondents did not have preschool children living with them and did not have the responsibility of caring for elderly relatives.

## **2. Questionnaire**

The "Tennessee Law Enforcement Officer Questionnaire" was developed for this study (See Appendix A). The same questionnaire was used for Time1 and Time2. In addition to demographic information, participants were asked to identify their awareness of 19 services that may be offered by their agency as well as the utilization and willingness to use these services. These questions were a modification of similar questions developed by Delprino, O'Quin and Kennedy (1997). The services presented included:

- Employment Assistance Program
- Counseling
- Marital and child support groups
- Stress reduction programs
- Hypertension clinics
- Health and wellness programs
- Group therapy
- Post-shooting debriefing
- Training/seminars on domestic violence
- Stress education
- Critical incident stress debriefing
- Counseling for exposure to HIV virus

- Peer support
- Short term counseling (under 6 months) related to line of duty death
- Long term counseling (over 6 months) related to line of duty death
- Family issues related to firearm safety
- Seminar regarding alcohol, drug use, gambling, or over eating
- Programs geared towards work and family issues
- Family orientation programs (spouse awareness, visiting department)

This questionnaire also presented 22 critical incidents that may have been experienced by law enforcement officers (Mitchell, 1983). Participants were asked to identify each incident they experienced on the job. The critical incidents presented included:

- Violent death of a fellow officer in the line of duty
- Taking a life in the line of duty
- Shooting someone in the line of duty
- Suicide of an officer who was a close friend
- Responding to the scene of gruesome suicide or homicide
- Suicide by police
- A duty related disabling injury to yourself
- Duty related violent injury or death to a violator
- Violent job related injury to another officer
- High speed pursuits resulting in an injury or death
- Pursuit of an armed suspect
- Answering a call to a scene of the violent non-accidental death of a child
- Brutal child abuse cases
- Personal involvement in a shooting incident
- Hostage situations
- Prolonged exposure to an incident or rescue attempt that ended in death
- Barricaded suspects
- Responding to a scene involving the accidental death of a child
- Multiple fatality automobile accident
- Plane crashes involving injury or death
- Man-made disasters involving injury or death
- Natural disasters

The final section of the questionnaire asked participants to identify posttraumatic stress disorder symptoms that they may have experienced after a critical incident on the job. A total of 17 symptoms were presented. The symptoms presented were developed

from the Diagnostic and Statistical Manual of Mental Disorders (1994). The symptoms presented included:

- Dreamed about the event
- Found yourself recalling the event, including images, thought or perceptions
- Found yourself at times reliving the event
- Reacted to cues that symbolize/resemble an aspect of the event
- Avoided thoughts, feelings or conversations about the event
- Avoided people, places or activities that cause you to recall the event
- Unable to recall some aspects of the event
- Felt detached or isolated from others
- At times felt like you had no feelings (frozen feelings)
- Less interest in doing the things you enjoyed
- Had difficulty falling asleep or staying awake
- Had outburst of anger
- Had difficulty concentrating or completing tasks
- Felt somewhat hopeless about the future
- Found yourself being hypervigilant
- Startled more than usual to loud noises
- Experienced sexual difficulties

### **3. Procedure**

All law enforcement agencies in Tennessee were organized into groups based on type of agency (City, County, State). Agencies from each group were randomly selected. The number of agencies represented in each group, as identified in Table 1, was determined to adequately represent law enforcement officers in each region (East, Middle, West) and type of agency (City, County, State).

Each participating organization was contacted prior to sending out questionnaires to inform them of the study and elicit their participation. Surveys for each officer in the participating agencies were sent to the head administrator in each department. Also an instruction sheet for completing the questionnaires was included (Appendix B). Each agency was assigned a three digit code. Agencies were instructed to return completed questionnaires to a principal investigator identified within 10 days. During this time

period, one of the principal investigators contacted each department to encourage their participation and answered any questions.

Completed questionnaires were reviewed by one of the principal investigators and delivered to Walter Scott State Community College where the questionnaires were scanned and the initial data base was developed. After all questionnaires were collected and scanned, the data base was made ready for analysis. Modifications included checking data for errors, missing information and recoding data to allow for scoring of the scales used.

## **B. Results and Discussion**

As stated earlier, a goal in distributing the baseline questionnaires was to identify changes in awareness and utilization of services across the three regions that had availability to different interventions. Although some of the participants that completed questionnaire Time1 and Time2 are the same, this is not true for the entire sample. Therefore, comparison of the results obtained from questionnaire Time1 and questionnaire Time2 would not be appropriate.

A strategy for analysis could have been a comparison of agencies whose members completed questionnaires Time1 and Time2. This comparison could have further been grouped by type of agency (City, County, State). This may have provided some insight as to changes in awareness and utilization of services at a department level, however the decision was made to present information at a regional level to protect the anonymity of participating agencies and officers. Therefore descriptive information by region is provided for results obtained from both questionnaires Time1 and Time2 in Table 3 through Table 12.

Since the two samples from Time1 and Time 2 are not truly repeated or independent, comparing differences between the two groups would be misleading. The value of this section of the evaluation is information obtained from Time1. A summary of the data from Time1 provides Tennessee with a baseline of the current awareness, utilization and willingness to use services. In addition, this data provides an understanding of the number of critical incidents that law enforcement officers in Tennessee have experienced as well as the potential to which these incidences have impacted officers' perception of their performance. Therefore what will be discussed here are the total results obtained for Time1.

In terms of awareness of services, the top five programs of which officers indicated greatest awareness included:

- Counseling 58.4% n=2739
- Post shooting debriefing 58.2% n=2723
- Training on domestic violence 57.7% n=2763
- Employee Assistance Program 53.8% n=2701
- Critical Incident Debriefing 41.5% n=2689

The following services are those of which respondents reported have the least awareness:

- Family firearm safety 20.0% n=2655
- Seminars on alcohol, drug use gambling or over eating 19.5% n=2638
- Hypertension clinics 19.0% n=2638
- Family orientation programs 13.0% n=2631
- Programs on work and family issues 12.3% n=2636

It is interesting that officers indicate that their agencies are less likely to have these services that are geared towards family members. Marital and child support groups were reported by only 20.6% (n=2603) of respondents. It appears that while officers are aware of services that can assist them, their agencies do not offer or they are not as aware of services that are available for family members.

Of services offered, the top five that officers reported utilizing included:

- |                                |       |        |
|--------------------------------|-------|--------|
| • Domestic violence training   | 41.3% | n=1406 |
| • Health and wellness programs | 34.4% | n= 958 |
| • Stress education             | 26.4% | n= 881 |
| • Family firearm safety        | 23.9% | n= 452 |
| • HIV exposure counseling      | 21.6% | n= 779 |

The next highest reported service used was family orientation programs reported being used by 20.6% of 296 respondents to that item.

Available programs which officers were less likely to report using included:

- |  |      |        |
|--|------|--------|
| • Group therapy                                | 6.3% | n= 475 |
| • Marital and child support groups             | 5.6% | n= 478 |
| • Stress reduction programs                    | 3.4% | n=2157 |
| • Short term counseling for line of duty death | 3.2% | n= 628 |
| • Long term counseling for line of duty death  | 2.2% | n= 496 |

Work and family programs were reported as used by 7% (n=296) of respondents.

It appears that if family related programs are made available, officers will use those programs, although they may be selective in which family related services they use.

Participants were also asked to identify their willingness to use each of the 19 services presented. Overall officers indicated a willingness to use services. Services that received the highest mean ratings included:

- |                              |        |         |
|------------------------------|--------|---------|
| • Post-shooting debriefing   | M=4.01 | SD=1.06 |
| • C.I.S.D.                   | M=3.97 | SD=1.02 |
| • Stress education           | M=3.84 | SD=1.03 |
| • HIV exposure counseling    | M=3.79 | SD=1.05 |
| • Domestic violence training | M=3.78 | SD=1.09 |

It is encouraging that officers indicated a willingness to participate in CISD and stress education since providing these services was the main objective of this project. For this sample, officers were less willing to use marital and child support groups (M=3.15, SD=1.13) and group therapy (M=3.15, SD=1.13).

Participants were asked to identify critical incidents that they had experienced on the job. From a list of 22 critical incidents presented, the most commonly experienced critical incidents reported by more than half of the respondents included:

- |   |       |        |
|---|-------|--------|
| • Responding to the scene of a gruesome suicide or homicide | 67.4% | n=2970 |
| • Natural disasters   | 59.5% | n=2966 |
| • Pursuit of an armed suspect                               | 57.8% | n=2957 |
| • Multiple fatality automobile accident                     | 57.5% | n=2962 |
| • Barricaded suspects                                       | 54.6% | n=2960 |
| • Responding to the accidental death of a child             | 51.5% | n=2962 |

Critical incidents which officers were less likely to experience included:

- |  |       |        |
|--|-------|--------|
| • Suicide by police                            | 11.9% | n=2962 |
| • Man-made disasters involving injury or death | 9.9%  | n=2958 |
| • Shooting someone in the line of duty         | 6.7%  | n=2967 |
| • Taking a life in the line of duty            | 2.9%  | n=2960 |

For this sample the number of critical incidents experienced ranged from 0 to 22. The mean number of critical incidents experienced was 6.66 (SD=5.05, n=3061). Officers in the eastern region reported the highest mean number of critical incidents (East, M=7.25, SD=5.05; Middle, M=6.58, SD=50.4; West, M=6.07, SD=4.95). Of those officers who experienced critical incidents, 26.7% reported experiencing at most 4 critical incidents; 50.7% reported experiencing at most 8, and 76% reported experiencing at maximum of 13 critical incidents on the job.

While a fair number of officers have experienced critical incidents on the job, only 16.7% of 3061 respondents indicated that the critical incidents had interfered with their ability to function at the scene or later. Officers did report experiencing an average of 4.31 (SD=4.48, n=3061) symptoms associated with posttraumatic disorder after the critical incident. Some of the more commonly reported symptoms included:

- |  |       |        |
|--|-------|--------|
| • Recalling the event including images, thoughts or perception | 60.6% | n=2970 |
| • Dreaming about the event                                     | 48.8% | n=2974 |
| • Difficulty on falling asleep or staying awake                | 35.8% | n=2967 |
| • Reliving the event   | 34.9% | n=2965 |

The number of symptoms experienced ranged from 0 to 17. Of those that experienced

symptoms, 26.3% reported at most 3 symptoms; 52% reported at most 8, and 70% of the officers that responded reported having experienced a maximum of 17 symptoms associated with posttraumatic stress disorder.

The information provided by the questionnaire provides a baseline of officers' awareness of services, and their willingness to use services. Also the results give some understanding of the level to which officers have been exposed to job related critical incidents and how these incidences have effected them. It appears that given the number of critical incidences these officers have been exposed to and the number of symptoms they have experienced that these officers would benefit to some type of intervention.

**III. Critical Incident Stress Debriefing (C.I.S.D.) Study.**

The goal of this portion of the project was to determine the effectiveness of critical incidents stress debriefing (CISD) as a means to assist officers in dealing with the negative effects of exposure to a critical incident. To identify the effectiveness of the CISD intervention as well as the support programs in each region, information was to be collected from officers who participated in a debriefing at three time periods (i.e. prior to CISD, 2-weeks after CISD, 3-months after CISD). As stated in section A. Research Model above, the Western region was to receive only Critical Incident Stress Debriefing (CISD); the Eastern region would receive CISD, and Peer Support; the Middle region would receive CISD, Peer Support, and Family Support.

<b>West</b>	<b>Middle</b>	<b>East</b>
CISD only	CISD Peer Support Family Support	CISD Peer Support

Although the Western Region was not a true control group, because it received some intervention, comparisons could have been made between the Western region and the Eastern and Middle regions that received Peer and Family support, to gain some understanding of the usefulness of these support groups. Comparing these three data points would have allowed for comparisons over time of the impact of the CISD as well as the inclusion of Peer and Family support teams in mitigating the potential negative effects of exposure to a job related critical incident.

The CISD team that had first contact with an officer at a CISD had the responsibility of collecting data from that officer at each of the three time periods (i.e. prior to CISD, 2-weeks after CISD, 3-months after CISD). While the goal was to collect information from all officers at all three time periods, the drop off in data collected from time 1 to time 3 was dramatic. Prior to CISD, information was collected from 197 officers. Two weeks later, information was collected from 102 officers. At the 3-month time period, information was collected from only 30 officers.

In addition, the Western region did not contact the Tennessee Law Enforcement Family Support Program for any debriefings during the course of this project. Therefore, data is only available for the Eastern and Middle regions. Analysis is further complicated due to inconsistencies in data collection. That is for some subjects, data was available at time 2 (2- week period), but data at time 1 (prior to CISD) was not available.

The available data required that subjects be matched based on demographic information to develop a database for analysis. For data collected at time 1 and time 2, there were approximately 60 matches of subjects for which data was available for both

time 1 and time 2. Of the 60 matched cases, 44 represented officers from the Eastern region and 14 represent officers from the Middle region.

The 30 cases collected in time 3 (3-months after CISD) provided less than 20 matches with time 1 and time2. Therefore, given the small number of matches from time 3, the discussion that follows will focus on the data available from the 60 matched cases that contain useful information from time1 and time2.

## **A. Method**

### **1. Participants from Time1 (Prior to CISD), Merged Files (Time1 and Time2) and 60 Matched Cases**

Participants included only those individuals who contacted the Tennessee Law Enforcement and Family Support Programs for a CID after a critical incident occurred. Demographic information is presented in Table 13. It is not surprising that the demographic information for Time 1 and the Merge Files is similar since the goal was to match as many cases as possible for data collected at time 1 (prior to CISD) and time 2 (2-weeks after CISD). The average age of participants from Time 1 and Merged Files was 35.5 (SD=8.3, n=174) 35.6 (SD=8.4, n=173) respectively and with an average of 10.2 years (SD=7.5, n=177) and 10.2 years (SD=7.5, n=175) of experience in law enforcement. The average age of the 60 matched cases was 34.3 (SD=8.65, n=54) and the average number of years of experience was 8.98 (SD=7.6, n=54).

### **2. Questionnaire**

The questionnaire used for collecting data at time 1 (prior to the CISD), time 2 (2-weeks after the CISD) and time 3 (3-months after the CISD) were the same except for item 82. In the initial questionnaire item 82 asked the participants as to when they first talked with someone about the incident. The questionnaires used at time 2 and time 3

asked participants to identify who they may have spoken to about the incident (see Appendix C).

The questionnaires requested basic demographic information. Participants also completed a number of standardized scale which included the:

- Impact of Events Scale-Revised, IES-R, (Weiss & Marmar, 1996)
- Satisfaction with Life Scale, SWLS, (Diener, Emmons, Larsen & Griffin, 1985)
- Stress Sub-scale of the Depression Anxiety Stress Scales, DASS, (Lovibond & Lovibond, 1995).

Participants also identified symptoms associate with Posttraumatic Stress. The symptoms presented were the same as those used in the baseline study (Diagnostic and Statistical Manual of Mental Disorders, 1994). Participants rated their satisfaction with the job, perceived change in their style of law enforcement, and perceived usefulness of debriefings to officers and family members.

Participants were also asked to identify what services they and their family may have used (EAP, Counseling, Family Support Team, Peer Support Team, Training Seminar). Finally participants were asked to identify any health problems they experienced since the incident, and lost work time as a result of the incident. A CISD Team member identified the type of critical incident that the officer experienced.

The reliability analysis for the standardized scales used for time 1, time 2, time 3 are presented in Table 14. Except for the reliability for the hyper-arousal sub-scale of the IES-R scale at time 3, which was .66, reliabilities for the scales ranged from .86 to .98. Reliability analysis for the results obtained from the 60 matched cases for time 1 and time 2 are presented in Table 15. As indicated in the Table 15, reliabilities ranged from .80 to .94.

### **3. Procedure**

Prior to implementing CISD, all team members throughout the State were informed as part of their training in critical incident stress debriefing and in writing of the steps needed to collect data from officers who participate in a CISD. A copy of the instructions is provided in Appendix D.

Team CISD members were instructed to distribute the questionnaires at three time periods (before a debriefing took place, 2 weeks after the debriefing, 3 months after the debriefing). Before completing any questionnaires, officers were presented a consent form that explained the purpose of the project, what would be required of them, and the confidentiality of the information provided (Appendix E). By collecting information prior to the debriefing, a baseline of the officer's current state could be measured. The collection of data after 2 weeks allowed Peer Teams and Family Teams to interact with the officers prior to the second measure. Members of the Peer and Family Support Teams were instructed to contact officers one week after the debriefing. The 3-month period was determined as the final collection of data for two reasons. First a period of three months is a guideline offered by the Diagnostic and Statistical Manual of Mental Disorders (1994) for the diagnosis of posttraumatic stress disorder (PTSD). If the duration of symptoms is less than 3 months then the PTSD is specified as Acute. If the duration of symptoms is 3 months or more than the PTSD is specified as Chronic. A second reason for choosing the 3-month time period was to allow for data to be collected in the given time period given to complete this project.

All completed questionnaires were returned via mail and delivered to Walter Scott State Community College where the questionnaires were scanned and the initial data base was developed.

## **A. Results and Discussion**

Although they will not be discussed in detail, for completeness of the information presented in this report, the mean scores obtained from time 1, time 2 and time 3 are presented in Table 16.

The mean scores for the 60 matched cases are presented in Table 17. The most common reason for the debriefing recorded by the CISD Team members for these 60 officers included:

- |  |      |
|--|------|
| ▪ Violent death of a partner in the line of duty       | n=12 |
| ▪ Shooting someone in the line of duty                 | n=12 |
| ▪ Violent death of another officer in the line of duty | n=11 |
| ▪ Prolonged exposure to an incident                    | n=13 |
| ▪ Other  | n=18 |

At time 1, only 3 officers indicated that they had used a service since the incident occurred. Services used included EAP, counseling, family support group, peer support group, and a seminar or training. Considering that debriefings typically take place between 24 and 72 hours after the incident, it is surprising that any officers used any available services. Also 2 officers reported at time 1 that their family members used some type of service. Once again all services identified on the questionnaire were identified as being used by a family member. Only 5 officers of the 60 in time 1 indicated that they had seen a doctor and wanted to call into work ill as a result of the critical incident. None of the officers reported using sick time as a result of the incident.

At time 2, 4 officers reported having used a service. All but a seminar or training was reported as used by these 4 officers. No family members were reported as using services in time 2. Since the first survey, 3 officers reported using sick leave as a result of the incident, 5 visited a doctor and 8 indicated that they wanted to call in sick but did not.

Of the 56 officers that responded to the question, 80.4% (n=45) indicated that they had spoken to someone about the incident within the first 3 days of it occurring. At the time of the debriefing only 6 (10.7%) indicated that they had not spoken to anyone about the incident.

To identify differences in scores obtained in time 1 and time 2 for the 60 officers who participated in a CISD, a series of t-test for repeated measures was conducted. The results of this analysis are presented in Table 18. The analysis indicates that significant differences were found for 6 of the measures.

1. The IES-R assesses 14 of the 17 DSM-IV symptoms for PTSD. The scale provides measures of three sub-scales:

- Intrusion - the recurrent distressing recollection of the event.
- Avoidance - persistent avoidance of stimuli associated with the incident and numbing of general responsiveness.
- Hyperarousal - feeling jumpy, easily startled or having trouble concentrating.

The subjects showed a significant drop in each of the three sub-scales indicating that after two weeks, the officers showed fewer signs of the symptoms of PTSD.

2. The information presented from the comparisons of the mean scores from the IES-R were confirmed by the significant reduction in the sum of PTSD symptoms reported by the officers.

3. Similarly the scores for the Stress sub-scale of the DASS significantly decreased from time 1 to time 2, indicating that officers experienced less stress at the 2-week time period.

4. Finally officers reported significantly fewer health problems at time 2 than at time 1.

Officers did not indicate any significant differences in their life satisfaction, or satisfaction with their job. Both the Satisfaction with Life Scale and the item which measure job satisfaction were global measure of these concepts. Also, officers did not perceive any change in the style in which they conduct their job. In addition, they did not significantly change their views of the usefulness of debriefing for officers or their family members. Overall officers perceive a value in being debriefed and having family members debriefed after an incident.

The results of this analysis indicate that officers did show an improvement in stress level and a decrease in PTS symptoms from time 1 to time 2. Such results are the goal of an intervention such as CISD. However, the results obtained here must be viewed with caution. First there is no control group to which to make comparisons. The lack of data from the Western region does not allow for comparison to be made that could strengthen these findings. Although the Western region would not have been a control group in the strictest sense, it would have allowed for some discussion of the inclusion and usefulness of family and peer support teams in addition to CISD. As a result, it is possible that time and distance from the incident could explain the reduction in stress, PTSD symptoms and health problems reported by officers in time 2. The inclusion of data from time 3 (3-month period) could also have clarified these findings. The data

from time 3 could have provided information of the impact of the CISD overtime, and its ability to minimize PTSD symptoms at a crucial time in the diagnosis of PTSD.

#### **IV. Evaluation of C.I.S.D., Peer and Family Teams.**

The goal of this section of the evaluation process was to identify the impact that the three Teams had on participants. Specifically participants' perception of the usefulness of the Teams and what was gained from their interaction with the Teams was to be measured.

##### **A. Method**

###### **1. Participants and Procedure**

Initially, the team evaluation forms were to be filled out by every individual who participated in a debriefing at the 2-week and 3-month periods. Asking participants to complete team evaluations at these time periods would allow participants in the Middle region to have exposure to the Family Support and Peer Support Teams, and participants in the Eastern region to have exposure to a Peer Support Team. The procedure was modified so that team evaluations were conducted at the completion of the project.

###### **2. Questionnaire**

The evaluation first asked the participant to identify if they had been contacted by a member of a team (CISD, Peer, Family). Participants then rated on 4 items their perception of the teams' effectiveness. An 11 addition items measured perceptions of what was gained from the team in terms of awareness, skills, knowledge and willingness to use resources. Copies of the evaluations are presented in Appendix F.

## **B. Results and Discussion**

Team evaluation surveys were returned by 81 participants. Participants that indicated that they had not been contacted by a team member were removed from analysis. This resulted in data from 62 evaluations being available for analysis representing 45 CISD Team evaluations, 11 Peer Team evaluations and 6 Family Team evaluations.

Summaries of the data representing each group of evaluations is presented in Table 19. The mean scores for overall team effectiveness were 4.58 (SD .43) for CISD Team, 4.61 (SD=.66) for the Peer Support Team and 4.67 (SD=.81) for the Family Support Team. (For the 4 items that dealt with Effectiveness: 1=Very poor, 2=Poor, 3=Average, 4=Good, 5=Excellent). It appears that participants perceive the Teams to be effective.

Similarly, respondents perceived that they gained awareness and knowledge from the teams. The mean scores for gains for the teams were 3.79 (SD =.95) for CISD Team, 4.37 (SD=.71) for the Peer Support Team and 4.62 (SD=.42) for the Family Support Team. (For the 11 items that dealt with Gains received form the Support Teams , 1=Not al all, 2=Slightly, 3=Moderately, 4=Quite a bit 5=A great deal).

Overall it appears that the teams had a positive effect on participants. More complete information could have provided a clearer and more convincing picture of the Teams effectiveness. For example, although in part two of this evaluation, data was collected from 197 officers who were debriefed at time one, only 45 CISD Team evaluations were available for analysis.

## **V. Summary**

The results reported here do provide some insight into the effectiveness of the Tennessee Law Enforcement and Family Support Programs. The Baseline study identifies officers needs, awareness, and willingness to use services. This information can be used to develop programs that would promote officer and family well being.

It does appear that the scales used to evaluate the CISD portion of this evaluation are sensitive to changes in officers' stress levels. Problems experienced with data collection, however, does not allow for definitive conclusions to be drawn about the effectiveness of CISD and the Support Teams. Similarly, the evaluations of the Teams, while very positive, would have benefited with the inclusion of responses from a larger portion of the sample.

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Table 1

Law Enforcement Agencies' Participation<sup>a</sup>

Time1											
Agency											
Region	City			County			State			Total Responses	
	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>		
East	13	656	364	10	495	335	5	284	219	918	
Middle	14	647	566	10	517	361	5	327	275	1202	
West	14	615	608	10	368	168	3	127	153	929	
Total	41	1918	1538	30	1380	864	13	738	647	3049	
Percent of Responses	80.2%			62.6%			87.7%				

Time2											
Agency											
Region	City			County			State			Total Responses	
	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>	n <sup>b</sup>	n <sup>c</sup>	n <sup>d</sup>		
East	11	518	351	7	282	195	5	259	208	754	
Middle	14	660	399	8	387	205	4	360	287	891	
West	14	615	408	6	281	181	3	157	126	715	
Total	39	1793	1158	21	950	581	12	776	621	2360	
Percent of Responses	64.6%			61.2%			80%				

<sup>a</sup> For Time1, information on region and type of agency was missing for 12 respondents, for Time2 information on region and type of agency was missing for 4 respondents. <sup>b</sup> Number of agencies in sample. <sup>c</sup> Number of questionnaires sent. <sup>d</sup> Number of questionnaires returned.

Table 2

Demographics of Participants from Time1 and Time2

Demographic	Time1 (N <sup>a</sup> =3061)		Time2 (N <sup>a</sup> =2364)	
	Percentage	n <sup>b</sup>	Percentage	n <sup>b</sup>
<b>1. Gender</b>				
Male	88.4	3005	90.4	2324
Female	11.6		9.6	
<b>2. Highest level of Education</b>				
High School/GED	29.4	2932	27.7	2258
Some College	40.5		39.2	
Associate Degree	10.0		10.7	
Bachelor's Degree	14.4		15.9	
Some Graduate Work	3.8		3.9	
Graduate Work	2.3		2.7	
<b>3. Ethnicity</b>				
African American	7.3	2996	8.1	2300
American Indian/Alaskan Native	.6		.8	
Asian or Pacific Islander	.2		.3	
White non Hispanic	91.0		89.8	
Hispanic	.9		.9	
<b>4. Active Duty in Military</b>				
Yes	31.7	3032	33.3	2328
No	68.3		66.7	
<b>5. Rank</b>				
Corporal	3.6	2964	3.2	2275
Sergeant	13.4		15.6	
Lieutenant	6.3		7.6	
Captain or higher	4.4		4.0	
Chief	.8		.6	
Sheriff	.5		.2	
No Rank	71.0		68.7	

<sup>a</sup> Total number of respondents to questionnaire. <sup>b</sup> Total number of responses to that item.

Table 2 (Continued)

Demographics of Participants from Time1 and Time2

Demographic	Time1 (N <sup>a</sup> =3061)		Time2 (N <sup>a</sup> =2364)	
	Percentage	n <sup>b</sup>	Percentage	n <sup>b</sup>
<b>6. Primary Duties</b>				
Patrol Officers	61.8	2923	66.8	2266
Detective/Investigator	11.3		12.1	
Communications	5.2		1.3	
Jailer	6.7		2.3	
Narcotic/ Vice	1.9		2.6	
Administrative	10.8		11.8	
Court/Process Server	1.9		2.3	
Juvenile	.2		.7	
<b>7. Marital Status</b>				
Single, never married	12.1	3024	11.1	2324
Currently married	73.2		73.8	
Separated	1.7		1.4	
Widowed, not remarried	.5		.6	
Divorced, not remarried	11.2		11.8	
Live together, not married	1.4		1.3	
<b>8. Number of times married</b>				
None	12.9	3020	12.4	2317
One	56.0		54.6	
Two	23.3		25.2	
Three	5.8		5.7	
Four or more	2.0		2.0	
<b>9. Live with preschool children.</b>				
Yes	22.8	3022	24.9	2306
No	77.2		75.1	
<b>10. Care for elderly relative</b>				
Yes	10.8	3021	10.6	2322
No	89.2		89.4	

<sup>a</sup> Total number of respondents to questionnaire. <sup>b</sup> Total number of responses to that item.

Table 3

Officers Awareness of Services, Time1 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
1. EAP	43.8	955	57.8	1002	61.4	736	37.5	8	53.8	2701
2. Counseling	52.4	954	59.6	1208	64.4	750	57.1	7	58.4	2739
3. Marital/child support groups	14.3	939	23.2	973	25.5	683	12.5	8	20.6	2603
4. Stress reduction programs	29.3	810	35.5	901	36.6	628	20.0	5	33.6	2344
5. Hypertension clinics	15.9	939	19.7	998	22.1	693	25.0	8	19.0	2638
6. Health & wellness programs	38.2	961	36.4	1017	41.4	724	25.0	8	38.3	2710
7. Group therapy	16.4	931	22.3	976	25.0	681	25.0	8	20.9	2596
8. Post-shooting debriefing	57.9	957	55.4	1035	62.8	724	28.6	7	58.2	2723
9. Domestic violence training	55.1	962	56.3	1059	63.1	735	42.9	7	57.7	2763
10. Stress education	31.8	950	36.8	1024	39.6	718	12.5	8	35.7	2700
11. C.I.S.D.	41.4	961	40.0	1016	44.1	705	28.6	7	41.5	2689
12. HIV exposure counseling	34.1	951	32.3	1028	32.6	691	66.7	6	32.9	2676
13. Peer support	20.4	934	19.1	999	25.4	688	12.5	8	21.2	2629
14. Line of duty death short term counseling	27.8	902	27.4	972	32.1	644	11.1	9	28.7	2527
15. Line of duty death long term counseling	22.5	897	22.9	969	23.1	645	57.1	7	22.8	2518
16. Family firearm safety	20.2	947	19.0	1002	21.5	699	57.1	7	20.0	2655
17. Seminars on alcohol, drug use, gambling, or over eating	16.3	942	20.9	1028	21.8	692	12.5	8	19.5	2670
18. Work and family programs	9.7	935	12.6	1009	15.2	685	14.3	7	12.3	2636
19. Family orientation programs	13.8	926	11.5	1004	14.1	693	62.5	8	13.0	2631

Total responses of awareness of service across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated awareness of service. <sup>d</sup> Total number of responses to that item.

Table 4

Officers Awareness of Services, Time2 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
1. EAP	47.1	728	66.2	855	58.6	707	0	2	57.7	2292
2. Counseling	56.6	735	68.6	861	67.6	701	50.0	2	64.5	2299
3. Marital/child support groups	17.2	732	19.6	851	18.9	684	50.0	2	18.6	2269
4. Stress reduction programs	22.0	733	22.0	847	24.9	687	50.0	2	22.8	2269
5. Hypertension clinics	17.4	726	20.2	846	17.6	686	0.	2	18.5	2260
6. Health & wellness programs	38.3	731	40.3	849	37.6	689	0	2	38.8	2271
7. Group therapy	15.3	727	20.9	842	20.6	669	0	2	19.0	2240
8. Post-shooting debriefing	59.2	735	61.5	846	60.9	695	50.0	2	60.5	2278
9. Domestic violence training	56.8	733	59.4	845	58.3	695	100.0	2	58.2	2275
10. Stress education	35.0	734	43.3	842	38.7	683	50.0	2	39.2	2261
11. C.I.S.D.	43.8	735	47.5	844	43.9	690	50.0	2	45.2	2271
12. HIV exposure counseling	29.4	739	36.6	846	28.3	689	50.0	2	31.8	2276
13. Peer support	22.1	729	30.6	839	19.0	673	0.00	2	24.3	2243
14. Line of duty death short term counseling	22.6	736	30.2	841	26.6	673	50.0	2	26.6	2252
15. Line of duty death long term counseling	16.8	730	26.1	842	21.3	672	50.0	2	21.7	2246
16. Family firearm safety	25.5	732	17.7	847	17.7	672	50.0	2	20.3	2253
17. Seminars on alcohol, drug use, gambling, or over eating	16.3	731	18.5	843	19.0	674	50.0	2	18.0	2250
18. Work and family programs	12.7	730	9.3	843	13.2	675	50.0	2	11.6	2250
19. Family orientation programs	14.1	731	10.6	842	14.9	673	0.0	2	13.0	2248

<sup>a</sup>Total responses of awareness of service across all regions for Time2. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated awareness of service. <sup>d</sup> Total number of responses to that item.

Table 5

Officers Utilization of Services, Time1 by Region and Total<sup>a</sup>

Service	Region								Total <sup>b</sup>	
	East		Middle		West		Missing <sup>c</sup>		% <sup>d</sup>	n <sup>e</sup>
	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>		
1. EAP	9.0	398	9.8	540	14.7	428	33.3	3	11.2	1369
2. Counseling	9.1	473	8.8	571	11.1	450	25.0	4	9.6	1498
3. Marital/child support groups	10.1	119	3.5	199	5.0	159	0	1	5.6	478
4. Stress reduction programs	3.8	729	2.8	845	3.5	576	14.3	7	3.4	2157
5. Hypertension clinics	20.7	140	3.4	174	6.8	132	0	2	9.8	448
6. Health & wellness programs	42.5	339	26.9	342	34.1	276	0	1	34.4	958
7. Group therapy	6.0	133	4.2	189	9.3	151	0	2	6.3	475
8. Post-shooting debriefing	11.4	509	11.1	505	16.0	407	50.0	2	12.6	1423
9. Domestic violence training	44.8	469	38.9	527	40.4	408	50.0	2	41.3	1406
10. Stress education	28.1	281	27.2	338	23.8	261	0.0	1	26.4	881
11. C.I.S.D.	13.7	366	13.7	357	17.4	281	0.0	2	14.7	1006
12. HIV exposure counseling	21.8	293	20.3	286	23.0	200	0.0	0	21.6	779
13. Peer support	19.0	163	18.4	163	18.4	153	0.0	1	18.6	479
14. Line of duty death short term counseling	2.2	227	1.8	222	6.2	178	0.0	1	3.2	628
15. Line of duty death long term counseling	2.2	183	1.1	188	4.0	125	0.0	0	2.2	496
16. Family firearm safety	34.0	162	17.4	155	19.4	134	0.0	0	23.9	451
17. Seminars on alcohol, drug use, gambling, or over eating	10.4	144	9.3	183	9.9	131	0.0	1	9.8	459
18. Work and family programs	9.1	77	4.8	105	7.9	89	0.0	0	7.0	272
19. Family orientation programs	29.2	113	16.8	95	13.6	88	0.0	0	20.6	296

Includes responses only from participants who indicated that the service was offered by their agency.

<sup>b</sup>Total responses of awareness of service across all regions for Time1. <sup>c</sup> Region not identified on returned questionnaire. <sup>d</sup> Percentage that indicated used service. <sup>e</sup> Total number of responses to that item.

Table 6

Officers Utilization of Services, Time2 by Region and Total<sup>a</sup>

Service	Region								Total <sup>b</sup>	
	East		Middle		West		Missing <sup>c</sup>		% <sup>d</sup>	n <sup>e</sup>
	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>	% <sup>d</sup>	n <sup>e</sup>		
1. EAP	9.2	327	10.1	515	17.2	396	0	0	12.1	1238
2. Counseling	7.0	388	10.3	533	10.3	439	0	1	9.3	1361
3. Marital/child support groups	2.6	117	2.7	148	5.1	118	0	1	3.4	384
4. Stress reduction programs	10.4	192	8.3	252	7.7	196	0	1	8.7	641
5. Hypertension clinics	9.6	115	9.3	151	8.9	112	0	0	9.3	378
6. Health & wellness programs	29.5	261	25.6	309	31.8	239	0	0	28.7	809
7. Group therapy	3.0	99	5.2	155	5.9	119	0	0	4.8	373
8. Post-shooting debriefing	13.5	394	9.6	456	14.3	378	0.0	1	12.3	1229
9. Domestic violence training	51.0	357	39.2	424	46.6	356	100.0	1	45.3	1138
10. Stress education	29.5	234	27.6	323	30.3	244	100.0	1	29.1	802
11. C.I.S.D.	17.3	295	12.9	350	13.8	269	0.0	1	14.5	915
12. HIV exposure counseling	26.2	195	17.4	258	10.0	170	100.0	1	18.3	624
13. Peer support	22.8	145	11.8	211	9.6	114	0.00	0	14.7	470
14. Line of duty death short term counseling	4.8	147	.5	220	6.3	160	0.0	1	3.4	528
15. Line of duty death long term counseling	3.7	108	1.1	187	1.6	126	0.0	1	1.9	422
16. Family firearm safety	40.5	163	16.8	131	28.3	106	100.0	1	29.7	401
17. Seminars on alcohol, drug use, gambling, or over eating	13.6	110	2.9	138	8.5	117	100.0	1	8.2	366
18. Work and family programs	9.5	84	8.8	68	4.7	85	100.0	1	8.0	238
19. Family orientation programs	20.0	95	24.1	79	9.5	95	0.0	0	17.5	269

<sup>a</sup>Includes responses only from participants who indicated that the service was offered by their agency.

<sup>b</sup>Total responses of awareness of service across all regions for Time2. <sup>c</sup> Region not identified on returned questionnaire. <sup>d</sup> Percentage that indicated used service. <sup>e</sup> Total number of responses to that item.

Table 7

Mean Scores for Willingness to Use Services, Time1 by Region and Total

Service	Region												Total <sup>a</sup>		
	East			Middle			West			Missing <sup>b</sup>			M	SD	n <sup>c</sup>
	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>			
1. EAP	3.49	1.02	981	3.43	1.04	1136	3.53	1.08	790	3.88	.83	8	3.48	1.04	2915
2. Counseling	3.44	1.00	984	3.41	1.04	1134	3.49	1.06	795	4.00	.93	8	3.44	1.03	2921
3. Marital/child support groups	3.16	1.11	982	3.13	1.13	1130	3.16	1.14	789	4.00	.82	7	3.15	1.13	2908
4. Stress reduction programs	3.71	1.04	981	3.72	1.05	1131	3.68	1.05	797	4.00	.82	7	3.71	1.05	2916
5. Hypertension clinics	3.51	1.07	980	3.52	1.07	1136	3.47	1.06	795	4.00	.82	7	3.50	1.07	2918
6. Health & wellness programs	3.86	1.06	979	3.72	1.06	1138	3.70	1.09	791	4.29	.76	7	3.76	1.07	2915
7. Group therapy	3.17	1.13	981	3.06	1.14	1136	3.25	1.11	789	4.00	.82	7	3.15	1.13	2913
8. Post-shooting debriefing	4.04	1.04	982	3.99	1.08	1131	4.00	1.05	792	4.25	.71	8	4.01	1.06	2913
9. Domestic violence training	3.79	1.08	978	3.76	1.11	1137	3.79	1.09	796	4.00	.82	7	3.78	1.09	2918
10. Stress education	3.84	1.01	974	3.84	1.04	1135	3.82	1.03	795	4.13	.83	8	3.84	1.03	2912
11. C.I.S.D.	3.98	1.00	980	3.99	1.04	1140	3.92	1.04	792	3.88	.83	8	3.97	1.02	2920
12. HIV exposure counseling	3.80	1.03	980	3.78	1.07	1135	3.80	1.06	794	4.00	.82	7	3.79	1.05	2916
13. Peer support	3.54	1.04	974	3.53	1.04	1139	3.54	1.07	788	3.88	.83	8	3.53	1.05	2909
14. Line of duty death short term counseling	3.76	.99	978	3.72	1.05	1134	3.76	1.05	794	4.14	.90	7	3.75	1.03	2913
15. Line of duty death long term counseling	3.66	1.01	981	3.62	1.07	1137	3.67	1.05	795	4.00	.93	8	3.65	1.05	2921
16. Family firearm safety	3.63	1.07	973	3.62	1.10	1133	3.62	1.15	793	3.86	.90	7	3.62	1.11	2906
17. Seminars on alcohol, drug use, gambling, or over eating	3.29	1.13	975	3.29	1.15	1131	3.32	1.16	792	4.14	.90	7	3.30	1.15	2905
18. Work and family programs	3.43	1.07	972	3.48	1.08	1131	3.49	1.09	793	4.14	.90	7	3.47	1.08	2903
19. Family orientation programs	3.47	1.13	969	3.53	1.14	1134	3.51	1.12	792	4.14	.90	7	3.51	1.13	2902

Note. For the scale measuring willingness to use services, 1=Definatly would not use service, 2=Probably would not use service, 3=Unsure, 4=Probably would use service, 5=Definatly would use service.

<sup>a</sup>Total responses of awareness of service across all regions for Time2. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Total number of responses to that item.

Table 8

Mean Scores for Willingness to Use Services, Time2 by Region and Total

Service	Region												Total <sup>a</sup>		
	East			Middle			West			Missing <sup>b</sup>			M	SD	n <sup>c</sup>
	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>	M	SD	n <sup>c</sup>			
1. EAP	3.37	1.01	732	3.45	1.06	849	3.55	1.03	711	3.00	0.0	2	3.46	1.04	2294
2. Counseling	3.35	1.02	729	3.44	1.05	850	3.51	1.04	709	3.5	.71	2	3.42	1.04	2290
3. Marital/child support groups	3.10	1.11	728	3.20	1.12	843	3.27	1.13	706	3.50	.71	2	3.19	1.12	2279
4. Stress reduction programs	3.59	1.02	728	3.65	1.01	844	3.60	1.05	709	3.50	.71	2	3.62	1.03	2283
5. Hypertension clinics	3.45	1.06	728	3.41	1.04	845	3.45	1.05	705	3.50	.71	2	3.43	1.05	2280
6. Health & wellness programs	3.82	1.04	732	3.71	1.02	849	3.68	1.07	703	4.00	.00	2	3.74	1.04	2286
7. Group therapy	3.08	1.12	724	3.16	.12	836	3.19	1.12	705	2.00	1.41	2	3.14	1.12	2267
. Post-shooting debriefing	4.09	.99	728	3.97	.03	843	3.98	0.03	706	4.00	1.41	2	4.01	1.02	2279
9. Domestic violence training	3.17	1.06	731	3.72	1.11	841	3.80	1.04	705	4.00	1.41	2	3.74	1.07	2279
10. Stress education	3.72	1.04	725	3.76	1.03	846	3.71	1.04	708	4.00	1.41	2	3.73	1.04	2281
11. C.I.S.D.	3.92	1.03	728	3.94	1.01	844	3.87	1.04	701	4.00	1.41	3	3.91	1.03	2275
12. HIV exposure counseling	3.73	1.03	729	3.74	1.04	839	3.68	1.06	707	4.00	1.41	2	3.72	1.04	2277
13. Peer support	3.43	1.05	727	3.49	1.05	839	3.56	1.04	709	4.00	0.00	2	3.49	1.05	2277
14. Line of duty death short term counseling	3.73	1.02	725	3.67	1.04	844	3.71	1.02	703	4.00	1.41	2	3.70	1.03	2274
15. Line of duty death long term counseling	3.63	1.04	726	3.60	1.06	834	3.61	1.05	706	4.00	1.41	2	3.61	1.05	2268
16. Family firearm safety	3.57	1.09	727	3.54	1.11	832	3.59	1.10	703	4.00	1.41	2	3.57	1.10	2264
17. Seminars on alcohol, drug use, gambling, or over eating	3.23	1.16	724	3.25	1.15	834	3.33	1.12	699	4.00	1.41	2	3.27	1.14	2259
18. Work and family programs	3.37	1.08	724	3.45	1.05	832	3.50	1.06	705	4.00	1.41	2	3.44	1.06	2263
19. Family orientation programs	3.45	1.11	726	3.46	1.13	832	3.48	1.14	704	4.00	1.41	2	3.47	1.12	2264

Note. For the scale measuring willingness to use services, 1=Definatly would not use service, 2=Probably would not use service, 3=Unsure, 4=Probably would use service, 5=Definatly would use service.

<sup>a</sup>Total responses of awareness of service across all regions for Time2. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Total number of responses to that item.

Table 9

**Critical Incidents Experienced on the Job, Time1 by Region and Total**

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
1. Violent death of a fellow officer in the line of duty	30.9	979	17.1	1131	20.3	844	28.6	7	22.6	2961
2. Taking a life in the line of duty	2.3	981	3.3	1131	3.1	840	12.5	8	2.9	2960
3. Shooting someone in the line of duty	5.8	984	7.8	1133	6.3	842	25.0	8	6.7	2967
4. Suicide of an officer who was a close friend	12.7	982	17.0	1130	10.6	841	25.0	8	13.8	2961
5. Responding to the scene of gruesome suicide or homicide	70.2	985	67.4	1134	64.1	844	85.7	7	67.4	2970
6. Suicide by police	11.1	982	14.9	1131	8.6	841	25.0	8	11.9	2962
7. A duty related disabling injury to yourself	14.8	982	14.2	1124	11.7	840	50.0	8	13.8	2954
8. Duty relate violent injury or death to a violator	26.8	984	28.2	1127	25.0	840	37.5	8	26.9	2959
9. Violent job related injury to another officer	32.2	983	29.4	1129	27.7	837	62.5	8	30.0	2957
10. High speed pursuits resulting in an injury or death	39.5	979	37.0	1126	30.2	842	85.7	7	36.0	2954
11. Pursuit of an armed suspect	60.01	979	57.9	1131	54.8	840	71.4	7	57.8	2957
12. Answering a call of the violent non-accidental death of a child	31.1	981	27.8	1132	26.0	841	37.5	8	28.4	2962
13. Brutal child abuse cases	38.3	987	34.5	1132	32.8	839	66.7	9	35.4	2967

<sup>a</sup>Total responses of critical incidents experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced critical incident. <sup>d</sup> Total number of responses to that item.

Table 9 (continued)

Critical Incidents Experienced on the Job, Time1 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
14. Personal involvement in a shooting incident	25.4	983	24.4	1125	23.2	839	62.5	8	24.5	2955
15. Hostage situations	45.2	980	35.1	1123	36.3	835	87.5	8	38.9	2946
16. Prolonged exposure to an incident that ended in death	17.2	981	10.3	1129	15.0	841	37.5	8	14.0	2959
17. Barricaded suspects	59.0	983	51.1	1132	53.9	837	87.5	8	54.6	2960
18. Responding to the accidental death of a child	54.5	982	51.5	1134	47.8	845	75.0	8	51.5	2969
19. Multiple fatality automobile accident	64.4	981	56.5	1128	50.4	845	75.0	8	57.5	2962
20. Plane crashes involving injury or death	28.6	977	25.8	1132	19.2	838	55.6	9	24.9	2956
21. Man-made disasters involving injury or death	13.0	984	10.6	1125	5.2	841	25.0	8	9.9	2958
22. Natural disasters	58.9	978	66.2	1135	51.2	844	77.8	9	59.5	2966

<sup>a</sup>Total responses of critical incidents experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced critical incident. <sup>d</sup> Total number of responses to that item.

Table 10

Critical Incidents Experienced on the Job, Time2 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
1. Violent death of a fellow officer in the line of duty	30.9	979	17.1	1131	20.3	844	28.6	7	22.6	2961
2. Taking a life in the line of duty	2.3	981	3.3	1131	3.1	840	12.5	8	2.9	2960
3. Shooting someone in the line of duty	5.8	984	7.8	1133	6.3	842	25.0	8	6.7	2967
4. Suicide of an officer who was a close friend	12.7	982	17.0	1130	10.6	841	25.0	8	13.8	2961
5. Responding to the scene of gruesome suicide or homicide	70.2	985	67.4	1134	64.1	844	85.7	7	67.4	2970
6. Suicide by police	11.1	982	14.9	1131	8.6	841	25.0	8	11.9	2962
7. A duty related disabling injury to yourself	14.8	982	14.2	1124	11.7	840	50.0	8	13.8	2954
8. Duty relate violent injury or death to a violator	26.8	984	28.2	1127	25.0	840	37.5	8	26.9	2959
9. Violent job related injury to another officer	32.2	983	29.4	1129	27.7	837	62.5	8	30.0	2957
10. High speed pursuits resulting in an injury or death	39.5	979	37.0	1126	30.2	842	85.7	7	36.0	2954
11. Pursuit of an armed suspect	60.01	979	57.9	1131	54.8	840	71.4	7	57.8	2957
12. Answering a call of the violent non-accidental death of a child	31.1	981	27.8	1132	26.0	841	37.5	8	28.4	2962
13. Brutal child abuse cases	38.3	987	34.5	1132	32.8	839	66.7	9	35.4	2967

<sup>a</sup> Total responses of critical incidents experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced critical incident. <sup>d</sup> Total number of responses to that item.

Table 10 (continued)

Critical Incidents Experienced on the Job, Time2 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
14. Personal involvement in a shooting incident	25.4	983	24.4	1125	23.2	839	62.5	8	24.5	2955
15. Hostage situations	45.2	980	35.1	1123	36.3	835	87.5	8	38.9	2946
16. Prolonged exposure to an incident that ended in death	17.2	981	10.3	1129	15.0	841	37.5	8	14.0	2959
17. Barricaded suspects	59.0	983	51.1	1132	53.9	837	87.5	8	54.6	2960
18. Responding to the accidental death of a child	54.5	982	51.5	1134	47.8	845	75.0	8	51.5	2969
19. Multiple fatality automobile accident	64.4	981	56.5	1128	50.4	845	75.0	8	57.5	2962
20. Plane crashes involving injury or death	28.6	977	25.8	1132	19.2	838	55.6	9	24.9	2956
21. Man-made disasters involving injury or death	13.0	984	10.6	1125	5.2	841	25.0	8	9.9	2958
22. Natural disasters	58.9	978	66.2	1135	51.2	844	77.8	9	59.5	2966

<sup>a</sup>Total responses of critical incidents experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced critical incident. <sup>d</sup> Total number of responses to that item.

Table 11

Symptoms Experienced after Job Related Critical Incident, Time1 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>
1. Dreamed about the event	53.0	981	46.3	1142	40.1	843	75.0	8	46.8	2974
2. Recalled the event, including images, thought or perceptions	65.3	979	59.9	1139	56.2	844	62.5	8	60.6	2970
3. Relived the event	38.1	978	33.7	1137	32.7	842	50.0	8	34.9	2965
4. Reacted to cues that symbolize aspect of the event	29.3	976	24.5	1142	23.8	841	50.0	8	26.0	2967
5. Avoided thoughts, feelings or conversations about the event	28.2	976	23.3	1143	21.8	845	37.5	8	24.5	2972
Avoided things that caused you to recall the event	16.2	976	12.9	1143	11.3	844	37.5	8	13.6	2971
7. Unable to recall some aspects of the event	18.1	976	16.7	1140	16.6	838	28.6	7	17.2	2961
8. Felt detached or isolated from others	20.7	975	19.3	1141	15.9	844	33.3	9	18.8	2969
9. At times felt like you had no feelings	33.5	979	30.8	1141	26.6	842	37.5	8	30.5	2970
10. Less interest in doing the things you enjoyed	20.7	976	19.1	1141	16.8	843	37.5	8	19.0	2968
11. Had difficulty falling asleep or staying awake	38.8	979	36.6	1138	31.1	843	57.1	7	35.8	2967

<sup>a</sup>Total responses of symptoms experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced symptom. <sup>d</sup> Total number of responses to that item.

Table 11 (continued)

Symptoms Experienced after Job Related Critical Incident, Time1 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
12. Had outburst of anger	26.9	978	22.1	1140	21.2	840	25.0	8	23.4	2966
13. Had difficulty concentrating or completing tasks	19.4	974	17.2	1143	14.5	841	25.0	8	17.2	2966
14. Felt somewhat hopeless about the future	20.2	967	16.5	1136	14.6	836	37.5	8	17.2	2947
15. Hypervigilant	42.2	974	36.9	1141	34.3	842	42.9	7	37.9	2964
16. Startled more than usual to loud noises	17.9	975	15.1	1139	13.3	842	28.6	7	15.6	2963
17. Experienced sexual difficulties	7.9	974	4.6	1136	4.8	840	14.3	7	5.7	2957

<sup>a</sup>Total responses of symptoms experienced across all regions for Time1. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced symptom. <sup>d</sup> Total number of responses to that item.

Table 12

Symptoms Experienced after Job Related Critical Incident, Time2 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
1. Dreamed about the event	51.8	738	48.8	863	44.5	710	0	2	48.4	2313
2. Recalled the event, including images, thought or perceptions	66.9	738	61.6	862	57.0	703	50.0	2	61.9	2309
3. Relived the event	36.5	737	35.1	864	31.1	708	0	2	34.3	2311
4. Reacted to cues that symbolize aspect of the event	29.4	734	26.7	866	21.2	707	0	2	25.9	2309
5. Avoided thoughts, feelings or conversations about the event	26.2	736	24.6	863	23.0	710	0	2	24.6	2311
Avoided things that caused you to recall the event	15.7	733	14.0	865	13.4	707	0	2	14.3	2307
7. Unable to recall some aspects of the event	20.2	734	19.2	866	13.8	708	0	2	17.8	231
8. Felt detached or isolated from others	19.1	737	15.3	863	14.4	707	50.0	2	16.3	2309
9. At times felt like you had no feelings	34.3	735	27.9	863	26.6	706	0	2	29.5	2306
10. Less interest in doing the things you enjoyed	19.7	736	18.3	860	15.4	706	0	2	17.8	2304
11. Had difficulty falling asleep or staying awake	37.6	734	35.8	860	29.4	708	0	2	34.4	2304

<sup>a</sup>Total responses of symptoms experienced across all regions for Time2. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced symptom. <sup>d</sup> Total number of responses to that item.

Table 12 (continued)

Symptoms Experienced after Job Related Critical Incident, Time2 by Region and Total

Service	Region								Total <sup>a</sup>	
	East		Middle		West		Missing <sup>b</sup>		% <sup>c</sup>	n <sup>d</sup>
	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>	% <sup>c</sup>	n <sup>d</sup>		
12. Had outburst of anger	24.0	734	21.7	862	19.0	707	0	2	21.6	2305
13. Had difficulty concentrating or completing tasks	16.5	733	16.6	859	13.6	706	0	2	15.7	2300
14. Felt somewhat hopeless about the future	18.3	734	16.1	856	12.4	700	0	2	15.6	2292
15. Hypervigilant	38.2	727	35.2	856	33.7	703	50.0	2	35.7	2288
16. Startled more than usual to loud noises	19.5	730	13.7	857	11.6	700	0	2	14.9	2289
17. Experienced sexual Difficulties	6.6	732	6.9	854	4.1	702	0	2	5.9	2290

<sup>a</sup>Total responses of symptoms experienced across all regions for Time2. <sup>b</sup> Region not identified on returned questionnaire. <sup>c</sup> Percentage that indicated experienced symptom. <sup>d</sup> Total number of responses to that item.

Table 13

Demographics for CISD Participants from Time1, Merged Files from Time1 and Time2, and 60 Matched Cases

Demographic	Time1 <sup>a</sup>		Merged Files <sup>b</sup> (Time 1 & Time 2)		60 Matched Cases <sup>c</sup>	
	Percentage <sup>d</sup>	n <sup>e</sup>	Percentage <sup>d</sup>	n <sup>e</sup>	Percentage <sup>d</sup>	n <sup>e</sup>
<b>1. Gender</b>						
Male	79.7	197	79.5	195	83.3	60
Female	20.3		20.5		16.7	
<b>2. Highest level of Education</b>						
High School/GED	24.5	192	24.2	190	32.8	58
Some College	44.8		45.3		48.3	
Associate Degree	12.0		11.6		6.9	
Bachelor's Degree	14.1		14.2		10.3	
Some Graduate Work	3.6		3.7		1.7	
Graduate Work	1.0		1.1		0.0	
<b>3. Ethnicity</b>						
African American	4.7	191	4.8	189	5.1	59
American Indian/Alaskan Native	2.1		2.1		1.7	
Asian or Pacific Islander	0.0		0.0		0.0	
White non Hispanic	93.2		93.1		93.2	
Hispanic	0.0		.9		0.0	
<b>4. Active Duty in Military</b>						
Yes	28.1	192	27.9	190	28.3	60
No	71.9		72.1		71.7	
<b>5. Rank</b>						
Corporal	3.6	192	3.7	190	5.1	59
Sergeant	9.9		9.5		11.9	
Lieutenant	5.2		5.3		3.4	
Captain or higher	5.7		5.8		8.5	
Chief	1.0		1.1		1.7	
Sheriff	.5		.5		1.7	
No Rank	74.0		74.2		67.8	

<sup>a</sup> Subjects from whom data was collected prior to CISD. <sup>b</sup> Subjects merged from time1 (prior to CISD) and time 2 (2-weeks after CISD). <sup>c</sup> 60 matched cases that had scores from time 1 and time 2. <sup>d</sup> Percentage of responses to item selection. <sup>e</sup> Total number of responses to that item.

Table 13 (continued)

Demographics for CISD Participants from Time1, Merged Files Time1 and Time2, and 60 Matched Cases

Demographic	Time1 <sup>a</sup>		Merged Files <sup>b</sup> (Time 1 & Time 2)		60 Matched Cases <sup>c</sup>	
	Percentage <sup>d</sup>	n <sup>e</sup>	Percentage <sup>d</sup>	n <sup>e</sup>	Percentage <sup>d</sup>	n <sup>e</sup>
<b>6. Primary Duties</b>						
Patrol Officers	61.8	157	61.8	157	51.0	51
Detective/Investigator	5.7		5.7		2.0	
Communications	7.6		7.6		2.0	
Jailer	15.3		15.3		35.0	
Narcotic/ Vice	.6		.6		2.0	
Administrative	7.0		7.0		5.9	
Court/Process Server	1.9		1.9		2.0	
Juvenile	0.0		0.0		0.0	
<b>7. Marital Status</b>						
Single, never married	13.1	160	13.1	160	10.9	55
Currently married	67.5		67.5		69.1	
Separated	5.0		5.0		3.6	
Widowed, not remarried	.6		.6		0.0	
Divorced, not remarried	12.5		12.5		14.5	
Live together, not married	1.3		1.3		1.8	
<b>8. Number of times married</b>						
None	18.0	189	18.0	187	16.9	59
One	65.6		65.2		61.0	
Two	14.3		14.4		20.3	
Three	1.6		1.6		1.7	
Four or more	.5		.5		0.0	
<b>9. Live with preschool children.</b>						
Yes	26.8	179	26.6	177	25.0	60
No	73.2		73.4		75.0	
<b>10. Care for elderly relative</b>						
Yes	5.7	175	5.8	173	1.7	60
No	94.3		94.2		98.3	
<b>11. Participated in defusing</b>						
Yes	33.7	190	33.5	188	36.2	58
No	66.3		66.5		63.8	

<sup>a</sup> Subjects from whom data was collected prior to CISD. <sup>b</sup> Subjects merged from time1 (prior to CISD) and time 2 (2-weeks after CISD). <sup>c</sup> 60 matched cases that had scores from time 1 and time. <sup>d</sup> Percentage of responses to item selection. <sup>e</sup> Total number of responses to that item.

Table 14

Reliability Analysis for Scales for Time 1 (Prior to CISD), Time 2 (2-Weeks After CISD), Time 3 (3-Months After CISD)

Scale	Reliability	M	SD
Time 1 (N=197)			
Impact of Events Scale-Revised			
Intrusion Sub-scale	.89	12.86	8.95
Avoidance Sub-scale	.86	10.52	9.33
Hyper-arousal Sub-scale	.86	8.46	7.98
Satisfaction with Life Scale	.86	24.32	6.50
Stress Sub-scale of the DASS	.94	9.36	8.60
Time 2 (N=102)			
Impact of Events Scale-Revised			
Intrusion Sub-scale	.91	8.83	8.68
Avoidance Sub-scale	.92	7.82	9.52
Hyper-arousal Sub-scale	.88	7.19	8.12
Satisfaction with Life Scale	.88	26.42	6.22
Stress Sub-scale of the DASS	.96	8.43	9.77
Time 3 (N=30)			
Impact of Events Scale-Revised			
Intrusion Sub-scale	.87	5.59	5.81
Avoidance Sub-scale	.86	4.48	6.20
Hyper-arousal Sub-scale	.66	3.96	4.13
Satisfaction with Life Scale	.98	27.52	6.81
Stress Sub-scale of the DASS	.94	6.04	8.03

Table 15

Reliability Analysis for Scales for the 60 Matched Cases at Time 1 (Prior to CISD) and Time 2 (2-Weeks After CISD).

Scale	Reliability	M	SD
Time 1			
Impact of Events Scale-Revised			
Intrusion Sub-scale	.89	11.60	9.17
Avoidance Sub-scale	.87	9.73	9.22
Hyper-arousal Sub-scale	.86	7.18	7.69
Satisfaction with Life Scale	.83	25.23	6.28
Stress Sub-scale of the DASS	.93	8.30	7.68
Time 2			
Impact of Events Scale-Revised			
Intrusion Sub-scale	.86	5.98	6.36
Avoidance Sub-scale	.89	4.23	6.06
Hyper-arousal Sub-scale	.80	4.12	5.30
Satisfaction with Life Scale	.87	25.97	6.21
Stress Sub-scale of the DASS	.94	5.38	6.71

Table 16

Mean Scores for Scales from Time 1, Time 2, and Time 3

Scale	M	SD	n <sup>a</sup>
Time 1 <sup>b</sup> (N=197)			
Impact of Events Scale-Revised			
Intrusion Sub-scale	12.86	8.95	189
Avoidance Sub-scale	10.52	9.33	187
Hyper-arousal Sub-scale	8.46	7.98	184
Satisfaction with Life Scale	24.32	6.50	192
Stress Sub-scale of the DASS	9.36	8.60	175
Sum of PST symptoms	4.39	3.68	197
Change in Job Satisfaction	3.75	1.02	193
Change in Style of Law Enforcement	4.40	1.17	188
Perceived Usefulness of Debriefing for Officer	2.04	1.55	192
Perceived Usefulness of Debriefing for Family	2.61	1.74	187
Health Related Problems	5.55	4.05	197
Time 2 <sup>c</sup> (N= <sup>102</sup> <del>197</del> )			
Impact of Events Scale-Revised			
Intrusion Sub-scale	8.83	8.68	101
Avoidance Sub-scale	7.82	9.52	95
Hyper-arousal Sub-scale	7.19	8.12	94
Satisfaction with Life Scale	26.42	6.22	100
Stress Sub-scale of the DASS	8.43	9.77	100
Sum of PST symptoms	3.46	3.94	102
Change in Job Satisfaction	4.05	1.14	100
Change in Style of Law Enforcement	4.52	1.16	96
Perceived Usefulness of Debriefing for Officer	1.31	0.82	101
Perceived Usefulness of Debriefing for Family	1.88	1.29	98
Health Related Problems	1.61	2.14	102

<sup>a</sup> Total number of responses to that item. <sup>b</sup> Prior to debriefing. <sup>c</sup> 2-weeks after debriefing. <sup>d</sup> 3-months after debriefing.

Table 16 (continued)

Mean Scores for Scales from Time 1, Time 2, and Time 3

Scale	M	SD	n <sup>a</sup>
Time 3 <sup>d</sup> (N= <del>197</del> <sup>30</sup> )			
Impact of Events Scale-Revised			
Intrusion Sub-scale	5.59	5.81	29
Avoidance Sub-scale	4.48	6.20	29
Hyper-arousal Sub-scale	3.96	4.13	25
Satisfaction with Life Scale	27.52	6.81	29
Stress Sub-scale of the DASS	6.04	8.03	28
Sum of PST symptoms	2.43	3.00	30
Change in Job Satisfaction	4.11	1.66	28
Change in Style of Law Enforcement	4.68	1.31	28
Perceived Usefulness of Debriefing for Officer	2.24	1.60	29
Perceived Usefulness of Debriefing for Family	2.69	1.75	29
Health Related Problems	1.07	1.76	30

<sup>a</sup> Total number of responses to that item. <sup>b</sup> Prior to debriefing. <sup>c</sup> 2-weeks after debriefing. <sup>d</sup> 3-months after debriefing.

Table 18

*SP*  
 T-test for Repeated Measures for 60 Matched Cases from Time 1 and Time2

Measures	M	SD	n <sup>a</sup>	t	df	p
<b>1. Impact of Events Scale-Revised</b>						
Intrusion Sub-scale						
Time1	11.60	9.17	60	5.97	59	<.01
Time2	5.98	6.36				
Avoidance Sub-scale						
Time1	9.73	9.22	60	5.93	59	<.01
Time2	4.23	6.06				
Hyper-arousal Sub-scale						
Time1	7.18	7.69	60	4.25	59	<.01
Time2	4.12	5.30				
<b>2. Satisfaction with Life Scale</b>						
Time1	25.23	6.28	60	-.96	59	n.s.
Time2	25.97	6.22				
<b>3. Stress Sub-scale of the DASS</b>						
Time1	8.30	7.68	60	3.79	59	<.01
Time2	5.38	6.07				
<b>4. Sum of PTS symptoms</b>						
Time1	4.25	3.62	60	4.88	59	<.01
Time2	2.63	3.45				
<b>5. Change in Job Satisfaction</b>						
Time1	3.82	0.95	60	-1.58	59	n.s.
Time2	4.08	1.11				
<b>6. Change in Style of Law Enforcement</b>						
Time1	4.50	1.19	56	-.58	55	n.s.
Time2	4.59	1.20				
<b>7. Perceived Usefulness of Debriefing for Officer</b>						
Time1	1.47	1.06	59	.10	58	n.s.
Time2	1.46	0.97				
<b>8. Perceived Usefulness of Debriefing for Family</b>						
Time1	2.25	1.52	56	.43	55	n.s.
Time2	2.16	1.46				
<b>9. Health Related Problems</b>						
Time1	6.79	3.74	29	4.97	28	<.01
Time2	3.07	2.67				

<sup>a</sup> Number of subjects

Table 19

Mean Scores of Responses to Team Evaluations

Item	Team									
	CISD (N=45)			Peer (N=11)			Family (N=6)			
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	
<u>Effectiveness</u>										
1. Overall evaluation	4.65	.48	43	4.81	.40	11	5.00	0.0	6	
2. Effectiveness of team	4.58	.54	43	4.73	.47	11	5.00	0.0	6	
3. Knowledge of referral resources	4.51	.59	43	4.36	1.21	11	4.33	1.63	6	
4. Availability	4.61	.49	44	4.55	1.21	11	4.33	1.63	6	
5. Overall Mean Score Effectiveness	4.58	.43	44	4.61	.66	11	4.67	.81	6	
<u>Gained From Team</u>										
1. Awareness of stress issues	3.86	1.15	44	4.64	.67	11	5.00	0.0	6	
2. Coping skills for job related stress	3.89	1.08	44	4.73	.65	11	4.83	.41	6	
3. Coping skills for family related stress	3.64	1.14	44	4.27	1.01	11	4.67	.52	6	
4. Impact on how deal with stress	3.70	1.05	44	4.45	.93	11	4.67	.52	6	
5. Impact how deal with family stress	3.39	1.22	44	4.45	.93	11	4.83	.41	6	
6. Impact how deal with job stress	3.74	.92	43	4.36	.92	11	4.50	.55	6	
7. Knowledge of support services	4.11	1.22	44	4.64	.92	11	4.67	.52	6	
8. Knowledge of family support services	3.89	1.22	44	4.18	.98	11	4.33	1.21	6	
9. More willing to use services	3.84	1.17	43	4.36	1.03	11	4.67	.52	6	
10. Interested in additional training	3.56	1.42	43	3.55	1.44	11	4.00	1.55	6	
11. Team's impact on work and family relations	4.02	.98	44	4.45	.69	11	4.67	.52	6	
12. Overall Mean Score Gains	3.79	.95	44	4.37	.71	11	4.62	.42	6	

Note. For the 5 items that dealt with Effectiveness: 1=Very poor, 2=Poor, 3=Average, 4=Good, 5=Excellent. For the 12 items that dealt with what was gained from the team: 1=Not at all, 2=Slightly, 3=Moderately, 4=Quite a bit, 5= A great deal.

<sup>a</sup> Total responses to that item

# Appendix A

INSTRUCTION SHEET FOR COMPLETING THE  
"TENNESSEE LAW ENFORCEMENT OFFICER QUESTIONNAIRE" FORM

(TIME)

Enclosed in this packet are forms to be completed by each officer in your department. Please include all "sworn officers", process servers, "dispatchers", and "post certified jailers". Also include "reserve officers". Do not include secretaries or clerical help that are civilian employees.

When the forms are completed, the forms are to be mailed to A. M. "Buster" Brown, 924 Mimosa Drive, Kingsport, TN 37660. Brown will check the forms and deliver them to the computer programmer to be processed.

Please do not fold, staple, tear, spindle, or mutilate the forms as these forms will be processed by a "scanner" machine that will not accept damaged forms.

Please use a #2 lead pencil. The "scanner" will not accept forms marked using ink pens.

There will be approximately 18,000 sheets scanned and the machine scanner must be used. About 423,000 marks will be scanned and counted. This would be too time consuming to do by hand.

In order to assure strict confidentiality, officers will not sign their name or use any identification number on this questionnaire that could identify the officer filling out this form.

For statistical analysis purposes, each agency that has been randomly selected to participate in this questionnaire survey has been assigned an "agency code number". Each agency instructor conducting this survey will be furnished with an "agency code number" that is to be marked on each survey form.

This survey will include 58 city, county or state law enforcement agencies and approximately 4,500 officers.

It is very important that this grant be conducted in a timely fashion. Each process or step has been assigned a "time line" date.

I respectfully request, beg, plead, and urge each instructor conducting this agency survey "Tennessee Law Enforcement Officer Questionnaire" to please complete and mail this survey within ten days after you receive the forms.

Harold Hays, Telephone 901-757-7335, Fax 901-757-7303 will be the coordinator of this survey for west Tennessee.

~~Paul Jennings~~, Telephone 615-885-7511, Fax 615-885-5785 will be the coordinator for middle Tennessee.

A. M. Brown, Telephone 423-247-8913, Fax 423-247-4916 will coordinate east Tennessee

*Leadership in Law Enforcement*

# TENNESSEE LAW ENFORCEMENT OFFICER QUESTIONNAIRE

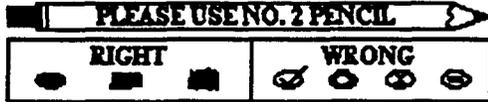
## AGENCY CODE NUMBER

- East
- Middle
- West

- 000
- 001
- 002
- 003
- 004
- 005
- 006
- 007
- 008
- 009

This work is sponsored by the National Institute of Justice grant awarded to the Tennessee Sheriff Association. The purpose of this survey is to better understand how the job impacts officers throughout the state of Tennessee. By completing this questionnaire you will be assisting in the development of programs specifically designed for officers and their family members. All information provided will remain confidential. The goal is not to identify specific agencies or officer but instead to identify overall trends. Your response is important to us and the law enforcement community in Tennessee.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- Do NOT use ink or ball point pens.
- Make heavy black marks that fill the bubble completely.
- Erase cleanly any you wish to change.
- Make no stray marks on this sheet.

**DO NOT FOLD, TEAR OR MUTILATE**

### 1. GENDER

- Male
- Female

### 2. AGE

- 00
- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09

### 3. What is your highest level of education?

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

### 4. What is your race (ethnicity)?

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

### 5. Have you ever served full time on active duty in the U.S. Military?

- Yes
- No

### 6. What is your rank within the department?

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

### 7. Primary duties at this time:

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

### 8. Number of years service in law enforcement?

- 00
- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09

### 9. Type of Agency:

- City
- County
- State

### 10. Marital Status:

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

### 11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

### 12. Do any preschool children live with you?

- Yes
- No

### 13. Do you or your spouse care for an elderly parent or relative?

- Yes
- No

14. The following are programs / services that may be offered by your agency. For each:

- First, indicate if you believe that your agency offers the programs / service. Select ? if you are not sure.
- Second, indicate if you have ever used the program / service.

	Does your agency offer this program / service?			Have you ever used this program / service?		
	Yes	No	?	Yes	No	
14.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
14.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■

15. How willing would you be to use the program / service listed? Indicate your willingness using the scale.

	Definitely would use service	Probably would use service	Unsure	Probably would not use service	Definitely would not use service	
15.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■
15.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	■

16. The following is a list of critical incidents that you may have experienced on the job. Please identify those incidents that you have experienced in your law enforcement career.

	Yes	No
16.1 Violent death of a fellow officer in the line of duty	<input type="radio"/>	<input type="radio"/>
16.2 Taking a life in the line of duty	<input type="radio"/>	<input type="radio"/>
16.3 Shooting someone in the line of duty	<input type="radio"/>	<input type="radio"/>
16.4 Suicide of an officer who was a close friend	<input type="radio"/>	<input type="radio"/>
16.5 Responding to the scene of gruesome suicide or homicide	<input type="radio"/>	<input type="radio"/>
16.6 Suicide by police	<input type="radio"/>	<input type="radio"/>
16.7 A duty related disabling injury to yourself	<input type="radio"/>	<input type="radio"/>
16.8 Duty related violent injury or death to a violator	<input type="radio"/>	<input type="radio"/>
16.9 Violent job related injury to another officer	<input type="radio"/>	<input type="radio"/>
16.10 High speed pursuits resulting in an injury or death	<input type="radio"/>	<input type="radio"/>
16.11 Pursuit of an armed suspect	<input type="radio"/>	<input type="radio"/>
16.12 Answering a call to a scene of the violent non-accidental death of a child	<input type="radio"/>	<input type="radio"/>
16.13 Brutal child abuse cases	<input type="radio"/>	<input type="radio"/>
16.14 Personal involvement in a shooting incident	<input type="radio"/>	<input type="radio"/>
16.15 Hostage situations	<input type="radio"/>	<input type="radio"/>
16.16 Prolonged exposure to an incident (hostage situation) or rescue attempts that end in death	<input type="radio"/>	<input type="radio"/>
16.17 Barricaded suspects	<input type="radio"/>	<input type="radio"/>
16.18 Responding to the scene involving the accidental death of a child.	<input type="radio"/>	<input type="radio"/>
16.19 Multiple fatality automobile accident	<input type="radio"/>	<input type="radio"/>
16.20 Plane crashes involving injury or death	<input type="radio"/>	<input type="radio"/>
16.21 Man-made disasters (bombing, etc) involving injury or death	<input type="radio"/>	<input type="radio"/>
16.22 Natural disasters (floods, hurricanes, tomadoes, etc)	<input type="radio"/>	<input type="radio"/>

17. Have any of the critical incidents listed above or other similar situations caused you to experience strong emotional reactions that have interfered with your ability to function either at the scene or later?

Yes  No

18. After experiencing a critical incident in your job, have you experienced any of the following:

	Yes	No
18.1 Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
18.2 Found yourself recalling the event, including images, thought or perceptions.	<input type="radio"/>	<input type="radio"/>
18.3 Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
18.4 Reacted to cues that symbolize / resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
18.5 Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
18.6 Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
18.7 Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
18.8 Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
18.9 At times felt like you had no feelings (frozen feelings).	<input type="radio"/>	<input type="radio"/>
18.10 Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
18.11 Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
18.12 Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
18.13 Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
18.14 Felt somewhat hopeless about the future.	<input type="radio"/>	<input type="radio"/>
18.15 Found yourself being hyper vigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
18.16 Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>
18.17 Experienced sexual difficulties.	<input type="radio"/>	<input type="radio"/>

# FINAL TENNESSEE LAW ENFORCEMENT OFFICER QUESTIONNAIRE

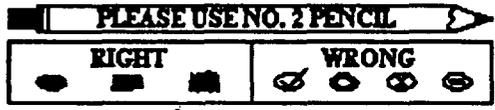
**AGENCY CODE NUMBER**

- East
- Middle
- West

- 000
- 010
- 020
- 030
- 040
- 050
- 060
- 070
- 080
- 090

This work is sponsored by the National Institute of Justice grant awarded to the Tennessee Sheriff Association. The purpose of this survey is to better understand how the job impacts officers throughout the state of Tennessee. By completing this questionnaire you will be assisting in the development of programs specifically designed for officers and their family members. All information provided will remain confidential. The goal is not to identify specific agencies or officer but instead to identify overall trends. Your response is important to us and the law enforcement community in Tennessee.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT FOLD, TEAR OR MUTILATE**

**1. GENDER**

- Male
- Female

**2. AGE**

- 00
- 01
- 02
- 03
- 04
- 05
- 06
- 07
- 08
- 09

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

- 00
- 01
- 02
- 03
- 04
- 05
- 6
- 7
- 8
- 9

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

**11. How many times have you been married?**

- None
- One
- Two
- Three
- Four or more

**12. Do any preschool children live with you?**

- Yes
- No

**13. Do you or your spouse care for an elderly parent or relative?**

- Yes
- No

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

14. The following are programs / services that may be offered by your agency. For each:

- First, indicate if you believe that your agency offers the programs / service. Select ? if you are not sure.
- Second, indicate if you have ever used the program / service.

	Does your agency offer this program / service?			Have you ever used this program / service?	
	Yes	No	?	Yes	No
14.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. How willing would you be to use the program / service listed? Indicate your willingness using the scale.

	Definitely would not use service	Probably would not use service	Unsure	Probably would use service	Definitely would use service
15.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. The following is a list of critical incidents that you may have experienced on the job. Please identify those incidents that you have experienced in your law enforcement career.

		Yes	No
<input type="checkbox"/>	16.1 Violent death of a fellow officer in the line of duty	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.2 Taking a life in the line of duty	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.3 Shooting someone in the line of duty	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.4 Suicide of an officer who was a close friend	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.5 Responding to the scene of gruesome suicide or homicide	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.6 Suicide by police	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.7 A duty related disabling injury to yourself	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.8 Duty related violent injury or death to a violator	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.9 Violent job related injury to another officer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.10 High speed pursuits resulting in an injury or death	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.11 Pursuit of an armed suspect	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.12 Answering a call to a scene of the violent non-accidental death of a child	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.13 Brutal child abuse cases	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.14 Personal involvement in a shooting incident	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.15 Hostage situations	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.16 Prolonged exposure to an incident (hostage situation) or rescue attempts that end in death	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.17 Barricaded suspects	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.18 Responding to the scene involving the accidental death of a child.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.19 Multiple fatality automobile accident	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.20 Plane crashes involving injury or death	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.21 Man-made disasters (bombing, etc) involving injury or death	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	16.22 Natural disasters (floods, hurricanes, tornadoes, etc)	<input type="checkbox"/>	<input type="checkbox"/>

17. Have any of the critical incidents listed above or other similar situations caused you to experience strong emotional reactions that have interfered with your ability to function either at the scene or later?

Yes  No

18. After experiencing a critical incident in your job, have you experienced any of the following:

		Yes	No
<input type="checkbox"/>	18.1 Dreamed about the events.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.2 Found yourself recalling the event, including images, thought or perceptions.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.3 Found yourself at times reliving the event.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.4 Reacted to cues that symbolize / resemble an aspect of the event.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.5 Avoided thoughts, feelings or conversations about the event.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.6 Avoided people, places or activities that cause you to recall the event.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.7 Unable to recall some aspects of the event.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.8 Felt detached or isolated from others.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.9 At times felt like you had no feelings (frozen feelings).	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.10 Less interest in doing things that you enjoyed.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.11 Had difficulty falling asleep or staying awake.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.12 Had outburst of anger.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.13 Had difficulty concentrating or completing tasks.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.14 Felt somewhat hopeless about the future.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.15 Found yourself being hyper vigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.16 Startled more than usual to loud noises.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	18.17 Experienced sexual difficulties.	<input type="checkbox"/>	<input type="checkbox"/>

## **Appendix B**

**INSTRUCTION SHEET FOR COMPLETING THE  
"TENNESSEE LAW ENFORCEMENT OFFICER QUESTIONNAIRE" FORM**

Enclosed in this packet are forms to be completed by each officer in your department. Please include all "sworn officers", process servers, "dispatchers", and "post certified jailers". Also include "reserve officers". Do not include secretaries or clerical help that are civilian employees.

When the forms are completed, the forms are to be mailed to A. M. "Buster" Brown, 924 Mimosa Drive, Kingsport, TN 37660. Brown will check the forms and deliver them to the computer programmer to be processed.

Please do not fold, staple, tear, spindle, or mutilate the forms as these forms will be processed by a "scanner" machine that will not accept damaged forms.

Please use a #2 lead pencil. The "scanner" will not accept forms marked using ink pens.

There will be approximately 18,000 sheets scanned and the machine scanner must be used. About 423,000 marks will be scanned and counted. This would be too time consuming to do by hand.

In order to assure strict confidentiality, officers will not sign their name or use any identification number on this questionnaire that could identify the officer filling out this form.

For statistical analysis purposes, each agency that has been randomly selected to participate in this questionnaire survey has been assigned an "agency code number". Each agency instructor conducting this survey will be furnished with an "agency code number" that is to be marked on each survey form.

This survey will include 58 city, county or state law enforcement agencies and approximately 4,500 officers.

It is very important that this grant be conducted in a timely fashion. Each process or step has been assigned a "time line" date.

I respectfully request, beg, plead, and urge each instructor conducting this agency survey "Tennessee Law Enforcement Officer Questionnaire" to please complete and mail this survey within ten days after you receive the forms.

Harold Hays, Telephone 901-757-7335, Fax 901-757-7303 will be the coordinator of this survey for west Tennessee.

~~Paul Jennings, Telephone 615-885-7511, Fax 615-885-5785 will be the coordinator for middle Tennessee.~~

A. M. Brown, Telephone 423-247-8913, Fax 423-247-4916 will coordinate east Tennessee

*Leadership in Law Enforcement*

## Appendix C

**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**CLIENT CODE**

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**FORM NUMBER**

0 0  
1 0  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**TEAM NUMBER OF INDIVIDUAL**

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

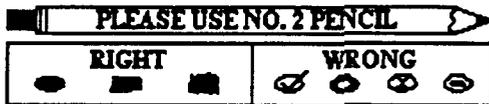
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - INITIAL**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male
- Female

**2. AGE**

0 0  
1 1  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

0 0  
1 1  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes
- No

13. Do you or your spouse care for an elderly parent or relative?

- Yes
- No

14. Have you participated in a Defusing prior to being Debriefed?

- Yes
- No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the critical incident with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I had trouble staying asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Other things kept making me think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I felt irritable and angry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I thought about it when I didn't mean to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I stayed away from reminders about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Pictures about it popped into my mind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I was jumpy and easily startled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I tried not to think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. My feelings about it were kind of numb.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I found myself acting or feeling like I was back at that time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I had trouble falling asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I had waves of strong feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I tried to remove it from my memory.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I had trouble concentrating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. I had dreams about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I felt watchful and on-guard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. I tried not to talk about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

Strongly Disagree

Disagree

Slightly Disagree

Neither Agree Nor Disagree

Slightly Agree

Agree

Strongly Agree

- 37. In most ways my life is close to my ideal.
- 38. The conditions of my life are excellent.
- 39. I am satisfied with my life.
- 40. So far, I have gotten the important things I want in life.
- 41. If I could live my life over, I would change almost nothing.



76. Since the critical incident, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

78. Since the critical incident, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

80. As a result of this critical incident, have you

	Yes	No
Used sick leave?	<input type="checkbox"/>	<input type="checkbox"/>
Been to a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Wanted to call in sick, but didn't?	<input type="checkbox"/>	<input type="checkbox"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. When did you first talk about the incident with someone other than your supervisor or an investigator?

Still have not  
 Within the first 3 days  
 Within the first week



**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East  
 Middle  
 West
- |                          |   |   |   |
|--------------------------|---|---|---|
| <input type="checkbox"/> | 0 | 0 | 0 |
| <input type="checkbox"/> | 1 | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 | 9 |

**CLIENT CODE**

- |                          |   |   |   |
|--------------------------|---|---|---|
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| <input type="checkbox"/> | 1 | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 | 9 |

**FORM NUMBER**

- |                          |   |   |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | 0 |
| <input type="checkbox"/> | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 |

**TEAM NUMBER OF INDIVIDUAL**

- |                          |   |   |   |
|--------------------------|---|---|---|
| <input type="checkbox"/> | 0 | 0 | 0 |
| <input type="checkbox"/> | 1 | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 | 9 |

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

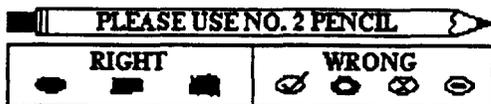
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - TWO WEEKS**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, **NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.**

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male  
 Female

**2. AGE**

- |                          |   |   |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | 0 |
| <input type="checkbox"/> | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 |

**3. What is your highest level of education?**

- High School / GED  
 Some College  
 Associate Degree  
 Bachelor's Degree  
 Some Graduate Work  
 Graduate Degree

**4. What is your race (ethnicity)?**

- African American  
 American Indian/Alaskan Native  
 Asian or Pacific Islander  
 White, not of Hispanic Origin  
 Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes     No

**6. What is your rank within the department?**

- CPL  
 SGT  
 LT  
 Capt. or Higher  
 Chief of Police  
 Sheriff  
 No Rank

**7. Primary duties at this time:**

- Patrol Officer  
 Det / Inv  
 Communications  
 Jailer  
 Narcotic Vice  
 Administrative  
 Court or Process Server  
 Juvenile

**8. Number of years service in law enforcement?**

- |                          |   |   |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | 0 |
| <input type="checkbox"/> | 1 | 1 |
| <input type="checkbox"/> | 2 | 2 |
| <input type="checkbox"/> | 3 | 3 |
| <input type="checkbox"/> | 4 | 4 |
| <input type="checkbox"/> | 5 | 5 |
| <input type="checkbox"/> | 6 | 6 |
| <input type="checkbox"/> | 7 | 7 |
| <input type="checkbox"/> | 8 | 8 |
| <input type="checkbox"/> | 9 | 9 |

**9. Type of Agency:**

- City  
 County  
 State

**10. Marital Status:**

- Single, never married  
 Currently married  
 Separated  
 Widowed, not remarried  
 Divorced, not remarried  
 Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes
- No

13. Do you or your spouse care for an elderly parent or relative?

- Yes
- No

14. Have you participated in a Defusing prior to being Debriefed?  
Yes  No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the last survey with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I had trouble staying asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Other things kept making me think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I felt irritable and angry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I thought about it when I didn't mean to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I stayed away from reminders about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Pictures about it popped into my mind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I was jumpy and easily startled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I tried not to think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. My feelings about it were kind of numb.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I found myself acting or feeling like I was back at that time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I had trouble falling asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I had waves of strong feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I tried to remove it from my memory.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I had trouble concentrating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. I had dreams about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I felt watchful and on-guard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. I tried not to talk about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
37. In most ways my life is close to my ideal.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. The conditions of my life are excellent.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. I am satisfied with my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. So far, I have gotten the important things I want in life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. If I could live my life over, I would change almost nothing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

For each of the statements below, use the scale below to indicate how much the statement applies to you since the last survey. There are no right or wrong answers. Do not spend too much time on any one statement.

	Did not apply to me at all			
	Applied to me to some degree or some of the time			
	Applied to me a considerable degree, or a good part of the time			
	Applied to me very much or most of the time			
42. I found it hard to wind down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I found it hard to calm down after something upset me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I found it difficult to relax.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. I felt I was using a lot of nervous energy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. I was in a state of nervous tension.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. I found myself getting upset rather easily.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. I found myself getting upset by quite trivial things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. I found myself getting agitated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50. I tended to over-react to situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. I found that I was very irritable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. I felt that I was rather touchy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. I was intolerant of anything that kept me from getting on with what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54. I found myself getting impatient when I was delayed in any way (e.g., traffic lights, being kept waiting).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. I found it difficult to tolerate interruptions to what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Have you experienced any of the following with respect to the event?

	Yes	No
56. Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
57. Found yourself recalling the event, including images, thought or perceptions such as smells.	<input type="radio"/>	<input type="radio"/>
58. Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
59. Reacted to cues that resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
60. Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
61. Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
62. Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
63. Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
64. At times felt like you had no feelings.	<input type="radio"/>	<input type="radio"/>
65. Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
66. Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
67. Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
68. Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
69. Felt somewhat hopeless about the future.	<input type="radio"/>	<input type="radio"/>
70. Found yourself being hypervigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
71. Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Less Enjoyable	No Change	More Enjoyable
72. Has your job satisfaction changed since the last survey?	<input type="radio"/> 1 <input type="radio"/> 2	<input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7
73. Has your style of law enforcement changed since the last survey?	<input type="radio"/> 1 <input type="radio"/> 2	<input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	<input type="radio"/> 6 <input type="radio"/> 7

Rate the following questions:

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
74. Do you think it is useful for personnel to have a debriefing after an incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
75. Do you think it is useful for your family members to have a debriefing to help them understand and cope with what you have experienced?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

76. Since the last survey, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

78. Since the last survey, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

80. Since the last survey and as a result of the critical incident, have you

	Yes	No
Used sick leave?	<input type="checkbox"/>	<input type="checkbox"/>
Been to a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Wanted to call in sick, but didn't?	<input type="checkbox"/>	<input type="checkbox"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. Since the last survey, have you talked to any of the following about the incident?

Check all that apply:

Family member  
 Close friend  
 Minister, Chaplain, or Clergy  
 Have talked to no one



**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

**CLIENT CODE**

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

**FORM NUMBER**

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

**TEAM NUMBER OF INDIVIDUAL**

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

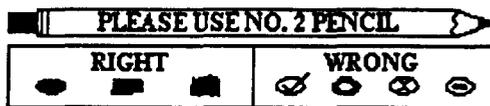
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - THREE MONTHS**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male
- Female

**2. AGE**

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes
- No

13. Do you or your spouse care for an elderly parent or relative?

- Yes
- No

14. Have you participated in a Defusing prior to being Debriefed?  
Yes  No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the last survey with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I had trouble staying asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Other things kept making me think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I felt irritable and angry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I thought about it when I didn't mean to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I stayed away from reminders about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Pictures about it popped into my mind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I was jumpy and easily startled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I tried not to think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. My feelings about it were kind of numb.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I found myself acting or feeling like I was back at that time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I had trouble falling asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I had waves of strong feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I tried to remove it from my memory.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I had trouble concentrating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. I had dreams about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I felt watchful and on-guard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. I tried not to talk about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

	Strongly Disagree	
	Disagree	
	Slightly Disagree	
	Neither Agree Nor Disagree	
	Slightly Agree	
	Agree	
	Strongly Agree	

37. In most ways my life is close to my ideal.	<input type="radio"/>						
38. The conditions of my life are excellent.	<input type="radio"/>						
39. I am satisfied with my life.	<input type="radio"/>						
40. So far, I have gotten the important things I want in life.	<input type="radio"/>						
41. If I could live my life over, I would change almost nothing.	<input type="radio"/>						

For each of the statements below, use the scale below to indicate how much the statement applies to you since the last survey. There are no right or wrong answers. Do not spend too much time on any one statement.

	Applied to me very much or most of the time	Applied to me a considerable degree, or a good part of the time	Applied to me to some degree or some of the time	Did not apply to me at all
42. I found it hard to wind down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I found it hard to calm down after something upset me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I found it difficult to relax.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. I felt I was using a lot of nervous energy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. I was in a state of nervous tension.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. I found myself getting upset rather easily.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. I found myself getting upset by quite trivial things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. I found myself getting agitated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50. I tended to over-react to situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. I found that I was very irritable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. I felt that I was rather touchy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. I was intolerant of anything that kept me from getting on with what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54. I found myself getting impatient when I was delayed in any way (e.g., traffic lights, being kept waiting).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. I found it difficult to tolerate interruptions to what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Have you experienced any of the following with respect to the event?

	Yes	No
56. Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
57. Found yourself recalling the event, including images, thought or perceptions such as smells.	<input type="radio"/>	<input type="radio"/>
58. Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
59. Reacted to cues that resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
60. Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
61. Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
62. Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
63. Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
64. At times felt like you had no feelings.	<input type="radio"/>	<input type="radio"/>
65. Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
66. Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
67. Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
68. Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
69. Felt somewhat hopeless about the future.	<input type="radio"/>	<input type="radio"/>
70. Found yourself being hypervigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
71. Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Less Enjoyable	No Change	More Enjoyable
72. Has your job satisfaction changed since the last survey?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
73. Has your style of law enforcement changed since the last survey?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
74. Do you think, it is useful for personnel to have a debriefing after an incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
75. Do you think it is useful for your family members to have a debriefing to help them understand and cope with what you have experienced?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

76. Since the last survey, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
<input type="checkbox"/> Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Counseling	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

78. Since the last survey, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
<input type="checkbox"/> Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Counseling	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

80. Since the last survey and as a result of the critical incident, have you

	Yes	No
<input type="checkbox"/> Used sick leave?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Been to a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Wanted to call in sick, but didn't?	<input type="checkbox"/>	<input type="checkbox"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. Since the last survey, have you talked to any of the following about the incident?

Check all that apply:

Family member  
 Close friend  
 Minister, Chaplain, or Clergy  
 Have talked to no one

TO BE COMPLETED BY CISD TEAM MEMBER  
IDENTIFICATION OF THE CRITICAL INCIDENT

- 83. Violent death of a partner in the line of duty.
  - 84. Taking a life in the line of duty.
  - 85. Shooting someone in the line of duty.
  - 86. Suicide of an officer who was, a close friend.
  - 87. Responding to the scene of gruesome suicides.
  - 88. Suicide by police.
  - 89. Violent death of another officer in the line of duty.
  - 90. Duty related violent injury.
  - 91. Violent job related injury to another officer.
  - 92. High speed pursuits.
  - 93. Pursuit of an armed suspect.
  - 94. Answering a call to a scene of the violent non accidental death of a child.
  - 95. Brutal child abuse cases.
  - 96. Personal involvement in a shooting incident.
  - 97. Hostage situations.
  - 98. Prolonged exposure to an incident (hostage situation) or rescue attempts that end in death.
  - 99. Barricaded suspects.
  - 100. Responding to the scene involving the accidental death of a child.
  - 101. Multiple fatality automobile accidents.
  - 102. Plane crashes.
  - 103. Man made disasters (bombing, etc.).
  - 104. Natural disasters (floods, hurricanes, tornadoes, etc.).
  - 105. Death Notification.
  - 106. Other, Specify
-

## Appendix D

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**Instructions for Distribution of Questionnaires and  
Peer, Family Support Groups**

**I. Instructions for Distribution of Questionnaires**

It is very important that we all be consistent and accurate in the distribution of questionnaires and the collection of information. The following are offered as guidelines to assist you in this task. If you have any question, concerns or comments about the questionnaires, please contact the Tennessee Law Enforcement and Family Support Program at (615) 884-1259.

**A. Research Goals:**

An important goal of this grant has been the development of C.I.S.D. Teams, Peer Support and Family Support Teams for the State of Tennessee. In addition, an equally important goal of this project is to evaluate the effectiveness of these programs so they may be replicated in other jurisdictions.

The questionnaires that you will distribute are vital in the evaluation of the program. As you are aware the State of Tennessee has been organized into three regions. Officers in each region who are exposed to a critical incident will have access to different services.

**West**  
C.I.S.D.

**Middle**  
C.I.S.D.  
Peer Support  
Family Support

**East**  
C.I.S.D.  
Peer Support

The questionnaires will allow us to evaluate what combination of services will offer the most benefits to officers and their family members.

**B. Informed Consent:**

All participants are required to read and sign the Informed Consent Statement (Please see attached) prior to completing the first questionnaire. For each participant two forms will be provided. One is to be signed and collected. The second copy of the consent form can be kept by the officer.

Be sure to stress to purpose of the project and that all information will be kept confidential. We are required by Federal regulations to follow strict guidelines to secure participants' confidentiality.

**C. Distribution of Questionnaires:**

1. The questionnaire will be distributed 3 times.
  - 1<sup>st</sup> - before the debriefing takes place
  - 2<sup>nd</sup> - 2 weeks after the debriefing
  - 3<sup>rd</sup> - 3 months after the debriefing

Team leaders will be responsible for the distribution, collection and return of completed questionnaires to the Program Manager, Ms. Betty Pritchett. Giving the scale three times will allow us to identify what changes take place over time based on the assistance the officers receive.

2. a. The **Informed Consent Form** and the 1st questionnaire will be given to officers at the debriefing, before the actual debriefing begins. This questionnaire is labeled **FORM-1 ( Debriefing)**. FORM-1 consists of general information about the participant, and items that will measure how the critical incident has impacted the officer.

7/11/98

- b. Also a member of the debriefing team will need to complete the Identification of the Critical Incident on FORM-1. This can be found on page 6 of FORM-1.
3. a. When the questionnaires are completed at the 2 week and 3 month periods, FORM-2 (2 weeks & 3 months) and FORM-2-A (2 weeks & 3 months) will be used.
    - b. FORM-2 contains similar information as FORM-1.
    - c. FORM-2-A asks the officers to evaluate the C.I.S.D. Team, Peer Support Team and the Family Support Team.
  4. Based on the region in which the critical incident occurred, different sections of FORM-2-A will be completed as follows:

<b>West</b>	<b>Middle</b>	<b>East</b>
SECTION A: CISD TEAM	SECTION A: CISD TEAM SECTION B: PEER SUPPORT SECTION C: FAMILY SUPPORT	SECTION A: CISD TEAM SECTION B: PEER SUPPORT

It may be easiest to just cross out the sections that do not apply to your region, before giving the questionnaire to the officer.

5. Each time questionnaires are completed, please use the mailing labels supplied and return all questionnaires to the Program Manager, Ms. Betty Prichard.

## **II. Instructions for Peer Support and Family Support Teams**

1. In addition to providing C.I.S.D., officers in Middle Tennessee will also be provided with Peer Support and Family Support. Officers in East Tennessee will be provided with Peer Support.
2. To allow for comparisons to be made between the different services, it is vital that officers in Middle and East Tennessee be provided those services prior to the 2<sup>nd</sup> distribution of the questionnaire. To accomplish this, members of the Peer and Family Support Teams need to contact the officer 1 week after the debriefing. This will ensure that the officer will have had some contact with the service prior to the 2<sup>nd</sup> distribution of the questionnaire.
3. When a member of the Peer and Family Support Teams contacts the officer, they need to ask the officer how they are doing, make the officer aware of the services that can be provided by the Support group, and, ask the officer if any assistance can be provided at that time.
4. A log should be kept as to when officers are contacted.

7/11/98

## Appendix E

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**Informed Consent Statement**

The purpose of this research project is to develop quality programs that can assist officers to better deal with critical incidents that may occur on the job and to minimize the impact that such incidents can have on the officer and their family members.

As part of this project you will be asked to complete several brief questionnaires now and again in 2 weeks and 3 months. It will take approximately 15 minutes to complete the questionnaires. The information you provide will assist in developing and identifying the effectiveness of programs specifically designed for officers and their family members.

All information you provide will be kept strictly confidential and will only be used for research purposes by the Tennessee Law Enforcement and Family Support Project. We are required by Federal regulations to follow strict guidelines to secure participants confidentiality. Information provided will **not** be released to other personnel in your department or other agencies. The goal of this project is to identify overall trends and not specific officers or agencies.

Your participation in this project, while strongly encouraged is completely voluntary. You may withdraw from participation at any time. If you have any questions or concerns about the questionnaires, the project or services, contact the Tennessee Law Enforcement and Family Support Program at (615) 884-1259.

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

7/11/98

## Appendix F





# FAMILY SUPPORT EVALUATION

Have you or your family members been contacted by a member of the Family Support Team?

Yes     No

If you answer No, do not complete the rest of this section.

Please use the following scales to evaluate the effectiveness of the Family Support Team.

Excellent				
Good				
Average				
Poor				
Very Poor				

- 1. Overall evaluation of the Family Support.
- 2. Effectiveness of the Family Support Team.
- 3. Knowledge of referral resource for services.
- 4. Available to provide assistance when contacted.

Please answer the following questions to evaluate what you have gained from Family Support.

A great deal				
Quite a bit				
Moderately				
Slightly				
Not at all				

- 5. Improved your awareness of stress issues.
- 6. Identified coping skills to deal with job related stress.
- 7. Identified coping skills to deal with family related stress.
- 8. Impacted how you personally dealt with stress?
- 9. Impacted how you dealt with family stress issues?
- 10. Impacted how you dealt with job related stress issues?
- 11. Increased knowledge of support services for you?
- 12. Increased knowledge of support services for your family?
- 13. Are you more willing to use available support services if needed?
- 14. Would you be interested in additional training on this topic?
- 15. Overall how did Family Support impact your work and family relations?

## DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.

AGENCY CODE NUMBER

- East
- Middle
- West

<input type="radio"/>	0	0	0
<input type="radio"/>	1	1	1
<input type="radio"/>	2	2	2
<input type="radio"/>	3	3	3
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CLIENT CODE

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<input type="radio"/>	7	7	7
<input type="radio"/>	8	8	8
<input type="radio"/>	9	9	9

FORM NUMBER

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<input type="radio"/>	1
<input type="radio"/>	2
<input type="radio"/>	3
<input type="radio"/>	4
<input type="radio"/>	5
<input type="radio"/>	6
<input type="radio"/>	7
<input type="radio"/>	8
<input type="radio"/>	9

TEAM NUMBER OF INDIVIDUAL

<input type="radio"/>	0	0	0
<input type="radio"/>	1	1	1
<input type="radio"/>	2	2	2
<input type="radio"/>	3	3	3
<input type="radio"/>	4	4	4
<input type="radio"/>	5	5	5
<input type="radio"/>	6	6	6
<input type="radio"/>	7	7	7
<input type="radio"/>	8	8	8
<input type="radio"/>	9	9	9

## First and last data records for Baseline time1 & time2

The variables are listed in the following order:

LINE 1: REGION DEPT GENDER AGE ED RACE VET RANK DUTIES YEARS AGENCY MARITAL  
TIMESMAR PRESCHOL ELDER OFFEAP OFFCOUCE

LINE 2: OFFGROUP OFFSTRED OFFHYPER OFFWELL OFFGRTHE OFFSHOOT OFFDOMES

LINE 3: OFFSTEDU OFFCISD OFFHIV OFFPEER OFFSTCOU OFFLTCOU OFFGUN

LINE 4: OFFSEM OFFWF OFFFAMOR USEEAP USECOUCE USEGROUP USESTRED

LINE 5: USEHYPER USEWELL USEGRTHE USESHOOT USEDOMES USESTEDU USECISD

LINE 6: USEHIV USEPEER USESTCOU USELTCOU USEGUN USESEM USEWF

LINE 7: USEFAMOR EAP COURCE GROUP STRED HYPER WELL

LINE 8: GP THE SHOOT DOMES STEDU CISD HIV PEER

LINE 9: STCOU LTCOU GUN SEM WF FAMES EAPR

LINE 10: COURCER GROU PR STREDR HYPERR WELLR GP THER SHOOTR

LINE 11: DOMESR STEDUR CISDR HIVR PEERR STCOUR LTCOUR

LINE 12: GUNR SEMR WFR FAMESR OFFDEATH TAKELIFE GUNUSED

LINE 13: SUICIDE1 SUICIDE2 SUICIDE3 INJURY1 INJURY2 INJURY3 PURSUIT1

LINE 14: PURSUIT2 KIDDEATH KIDABUSE SHOOTING HOSTAGE LONGEXP BARRICAD

LINE 15: KIDDEAD2 AUTO PLANE MANMADE DISASTER INTERFER DREAM

LINE 16: RECALL RELIVE CUES THOUGHTS PEOPLE NORECALL DETACHED

LINE 17: FEELINGS INTEREST SLEEP ANGER TASKS HOPELESS VIGILANT

LINE 18: STARTLED SEX VERSION Q14.1R Q14.2R Q14.3R Q14.4R

LINE 19: Q14.5R Q14.6R Q14.7R Q14.8R Q14.9R Q14.10R Q14.11R

LINE 20: Q14.12R Q14.13R Q14.14R Q14.15R Q14.16R Q14.17R Q14.18R

LINE 21: Q14.19R Q15MEAN Q15R Q16SUM Q18SUM YEARSR FILTER\_ \$

**FIRST CASE**

REGION:	2	92	M	.	.	4	N	2	1	21	1	2	3	N		N		Y		Y	
OFFGROUP:	N		N				N					N			N		N		N		N
OFFSTEDU:	N		N				N					N			Y		Y		N		N
OFFSEM:	N		N				N					N			N		*		N		N
USEHYPER:	*		*				*					*			N		N		Y		Y
USEHIV:	*						N					*			N		N				*
USEFAMOR:							4				4				3		3		3		3
GPTHE:		3					4				3				4		4		4		3
STCOU:		4					4				4				3		3		3		3
COURCER:		3					.				.				.		.		.		3
DOMESR:		.					3				3				3		.		3		3
GUNR:		3					.				.				.	N		N		N	
SUICIDE1:	Y		Y				N				N				N		N		N		N
PURSUIT2:	Y		Y				Y				Y				N		N		N		Y
KIDDEAD2:	Y		Y				Y				N				Y		N		N		N
RECALL:	N		N				N				N				N		N		N		N
FEELINGS:	N		N				N				N				N		N		N		N
STARTLED:	N		N								1	N			N		N		N		N
Q14.5R:																					
Q14.12R:							N				*										
Q14.19R:							3.47				3.00				11				0	21	1

**LAST CASE**

REGION:	3	52	M	29	1	4	N	7	1	2	1	5	3	N		N		N		N	
OFFGROUP:	N		N				N					N			N		N		N		N
OFFSTEDU:	N		N				N					N			N		N		N		N
OFFSEM:	N		N				N														
USEHYPER:																					
USEHIV:																					
USEFAMOR:							3				3				4		4		3		3
GPTHE:		3					3				4				4		3		3		3
STCOU:		3					3				3				3		3		3		.
COURCER:		.					3				3				.		.		.		.
DOMESR:		3					3				.				.		.		.		.
GUNR:		.					.				.				.	N		N		N	
SUICIDE1:	N		N				N				N				N		N		N		Y
PURSUIT2:	N		N				N				N				N		N		N		N
KIDDEAD2:	N		N				N				N				N		N		N		N
RECALL:	N		N				N				N				N		N		N		N
FEELINGS:	N		N				N				N				N		N		N		N
STARTLED:	N		N								2										
Q14.5R:																					
Q14.12R:																					
Q14.19R:							3.21				3.00				1				0	2	1

# DATA DICTIONARY FOR BASELINE TIME1 & TIME2

File Type: SPSS Data File

Creation Date: 22 Jul 99

Creation Time: 18:10:08

Label: Not Available

N of Cases: 5425

Total # of Defined Variable Elements: 157

# of Named Variables: 157

Data Are Not Weighted

Data Are Compressed

File Has Same Byte Order as Host

File Contains Case Data

File Contains No Variable Sets

File Contains No Trends Date Information

File Contains No Multiple Response Definitions

File Contains No Data Entry for Windows Information

File Contains No TextSmart Information

File Is Compatible with SPSS Releases Prior to 7.5

Variable Information:

Name		Position
REGION	region Measurement level: Scale Format: F1 Column Width: Unknown Alignment: Right  Value    Label 1    east 2    middle 3    west	1
DEPT	department Measurement level: Scale Format: F3 Column Width: Unknown Alignment: Right	2
GENDER	gender Measurement level: Nominal Format: A1 Column Width: Unknown Alignment: Left Missing Values: '', '*'  Value    Label M    missing • M    invalid response F    female M    male	3
AGE	age Measurement level: Scale Format: F2 Column Width: Unknown Alignment: Right	4
ED	education Measurement level: Scale Format: F1 Column Width: Unknown Alignment: Right  Value    Label 1    highschool/GED 2    some college 3    Associate degree 4    Bachelor's degree 5    Some graduate work 6    Graduate degree	5

RACE race 6  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	African American
2	American Indian/Alaskan Native
3	Asian or Pacific Islander
4	White not of Hispanic Origin
5	Hispanic

VET Veteran 7  
Measurement level: Nominal  
Format: A1 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
M	missing
• M	invalid response
N	no
Y	yes

RANK Rank within department 8  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	Corporal
2	Sergeant
3	Lieutenant
4	Captain or higher
5	Chief of police
6	Sheriff
7	No rank

DUTIES Primart duties 9  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	Patrol officer
2	Detective/Investigator
3	Communications
4	Jailer
5	Narcotoc vice
6	Administrative
7	Cour or Process Server
8	Juvenile

YEARS Number of years service in law enforcement 10  
Measurement level: Scale  
Format: F2 Column Width: Unknown Alignment: Right

AGENCY Type of agency 11  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	City
2	County
3	State

MARITAL Marital Status 12  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	Singel, never married
2	Currently married
3	Seperated
4	Widowed, not remarried
5	Divorced, not remarried
6	Live together, not married

TIMESMAR Numberof times married 13  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
1	none
2	one
3	two
4	three
5	four or more

PRESCHOL preschool child lives with you 14  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

ELDER care for elderly relative 15  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFEAP Offer EAP 16  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFCOUCE Offer Counseling 17  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFGROUP Offer marital child support group 18  
 Measurement level: Nominal  
 Format: A8 Column Width: 7 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFSTRED Offer stress reduction program 19  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFHYPER Offer Hypertension Clinics 20  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFWELL Offer health wellness program 21  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFGRTHE Offer group therapy 22  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFSHOOT Offer post shoot debriefing 23  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFDOMES Offer seminat domestic violence 24  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFSTEDU Offer stress education 25  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFCISD Offer CISD 26  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFHIV Offer HIV counseling 27  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFPEER Offer peer support 28  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

OFFSTCOU Offer short term counseling line of duty death 29  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFLTCOU Offer long tern counseling line of duth death 30  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFGUN Offer family firearm safety 31  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFSEM Offer seminar alcohol, drug, gambeling, eating 32  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFWF Offer work family programs 33  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

OFFFAMOR Offer family orientation 34  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

USEEAP Use EAP 35  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

USECOUCE Use counseling 36  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

USEGROUP	Use support groups	37
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USESTRED	Use Stress ed programs	38
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEHYPER	Use hypertension clinics	39
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEWELL	Use health wellness program	40
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

USEGRTHE Use group therapy 41  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

USESHOOT Use posr shoot debriefing 42  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

USEDOMES Use seminar domestic violence 43  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

USESTEDU Use stress ed 44  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

USECISD	Use CISD	45
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEHIV	Use HIV counseling	46
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEPEER	Use peer support	47
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USESTCOU	Use short term council line of duty death	48
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

USELTCOU	Use long term council line of duty death	49
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEGUN	Use family frirearm safety	50
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USESEM	Use seminar alcohol, drugs, gambeling, eating	51
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
USEWF	Use work family programs	52
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

USEFAMOR Use family orientation 53  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

EAP would use EAP 54  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

COURSE would use counseling 55  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

GROUP would use family support group 56  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

STRED would use stress reduce program 57  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

HYPHER would use hypertension clinic 58  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

WELL would use wellness program 59  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

GPTHE would use group therapy 60  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

SHOOT would use post shoot debrief 61  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

DOMES would use domestic vio seminar 62  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

STEDU would use stress ed 63  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

CISD would use CISD 64  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

HIV would use HIV council 65  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

PEER would use peer council 66  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

STCOU would use short term council line death 67  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

LTCOU would use long tern council line death 68  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

GUN would use family firearm safety 69  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

SEM would use seminat on drugs, eating etc. 70  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

WF would use work family program 71  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use

FAMES would use family orientation 72  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Right

Value	Label
1	definatly not use
2	probably not use
3	unsure
4	probably would use
5	definatly would use



HYPERR	recode would use hypertension clinic Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	77										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
WELLR	recode would use wellness program Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	78										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
GPTHER	recode would use group therapy Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	79										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
SHOOTR	recode would use post shoot debrief Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	80										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											



PEERR	recode would use peer council Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	85										
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1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
STCOUR	recode would use short term council line death Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	86										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
LTCOUR	recode would use long tern council line death Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	87										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											
GUNR	recode would use family firearm safety Measurement level: Scale Format: F8 Column Width: 8 Alignment: Right	88										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>definatly not use</td> </tr> <tr> <td>2</td> <td>probably not use</td> </tr> <tr> <td>3</td> <td>probably would use</td> </tr> <tr> <td>4</td> <td>definatly would use</td> </tr> </tbody> </table>	Value	Label	1	definatly not use	2	probably not use	3	probably would use	4	definatly would use	
Value	Label											
1	definatly not use											
2	probably not use											
3	probably would use											
4	definatly would use											

SEMR recode would use seminats on drugs, eating etc. 89  
 Measurement level: Scale  
 Format: F8 Column Width: 8 Alignment: Right

Value	Label
1	definitely not use
2	probably not use
3	probably would use
4	definitely would use

WFR recode would use work family program 90  
 Measurement level: Scale  
 Format: F8 Column Width: 8 Alignment: Right

Value	Label
1	definitely not use
2	probably not use
3	probably would use
4	definitely would use

FAMESR recode would use family orientation 91  
 Measurement level: Scale  
 Format: F8 Column Width: 8 Alignment: Right

Value	Label
1	definitely not use
2	probably not use
3	probably would use
4	definitely would use

OFFDEATH CI death of officer on job 92  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invalid response
N	no
Y	yes

TAKELIFE CI take a life 93  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

GUNUSED CI shoot someone 94  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

SUICIDE1 CI officer friend suicide 95  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

SUICIDE2 CI respond to suicide 96  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

SUICIDE3 CI police suicide 97  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invalid response
N		no
Y		yes

INJURY1 CI injury to self 98  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

INJURY2 CI injury death to violator 99  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invalid response
N		no
Y		yes

INJURY3 CI injury to other officer 100  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invalid response
N		no
Y		yes

PURSUIT1 CIhigh speed pursuit death injuty 101  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

PURSUIT2 CI purrsuit armed suspect 102  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

KIDDEATH CI nonaccident death child 103  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

KIDABUSE CI child abuse 104  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

SHOOTING CI involved in shooting 105  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

HOSTAGE CI hostage situation 106  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

LONGEXP CI long exposure to incident. 107  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

BARRICAD CI barricaed suspect 108  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

KIDDEAD2	CI accidental death child Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left Missing Values: '', '*'	109
	Value    Label  •            M missing M invali response N            no Y            yes	
AUTO	CI fatal auto accident Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left Missing Values: '', '*'	110
	Value    Label  •            M missing M invali response N            no Y            yes	
PLANE	CI fatal plane crash Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left Missing Values: '', '*'	111
	Value    Label  *            M missing M invali response N            no Y            yes	
MANMADE	CI man made disaster Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left Missing Values: '', '*'	112
	Value    Label  •            M missing M invali response N            no Y            yes	

DISASTER CI natural disaster 113  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

INTERFER Critical incidetn interfere with job 114  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

DREAM SYMP dream of event 115  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

RECALL SYMP recall event 116  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

RELIVE SYMP relive event 117  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

CUES SYMP react to cues 118  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

THOUGHTS SYMP avoid thought of event 119  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

PEOPLE SYMP avoid people cause recall 120  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

NORECALL SYMP unable to recall 121  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

DETACHED SYMP feel detached 122  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

FEELINGS SYMP no feelings 123  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

INTEREST SYMP less interest in what enjoy 124  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

**SLEEP** SYMP sleep problems 125  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

**ANGER** SYMP outburst 126  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

**TASKS** SYMP difficulty concentrate 127  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

**HOPELESS** SYMP hopeless future 128  
 Measurement level: Nominal  
 Format: A8 Column Width: Unknown Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

VIGILANT SYMP hypervigilant 129  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

STARTLED SYMP startled 130  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

SEX SYMP sexual problems 131  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

VERSION version 1 or version 2 132  
Measurement level: Scale  
Format: F8 Column Width: Unknown Alignment: Left

	Value	Label
	1	version 1
	2	version 2

Q14.1R	Offered and Used EAP	133
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
•	M invali response	
N	no	
Y	yes	
Q14.2R	Offered and Used counseling	134
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
•	M invali response	
N	no	
Y	yes	
Q14.3R	Offered and Used support groups	135
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
Q14.4R	Offered and Used Stress ed programs	136
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

Q14.5R	Offered and Used hypertension clinics	137
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
Q14.6R	Offered and Used health wellness program	138
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
Q14.7R	Offered and Used group therapy	139
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
•	M invali response	
N	no	
Y	yes	
Q14.8R	Offered and Used post shoot debriefing	140
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

Q14.9R Offered and Used seminar domestic violence 141  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

Q14.10R Offered and Used stress ed 142  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

Q14.11R Offered and Used CISD 143  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

Q14.12R Offered and Used HIV counseling 144  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

Q14.13R Offered and Used peer support 145  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

Q14.14R Offered and Used short term council line of duty death 146  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

Q14.15R Offered and Used long term council line of duty death 147  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

Q14.16R Offered and Used family frirearm safety 148  
Measurement level: Nominal  
Format: A8 Column Width: Unknown Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invali response
N		no
Y		yes

Q14.17R	Offered and Used seminar alcohol, drugs, gambling, eating	149
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	• M missing	
	• M invali response	
N	no	
Y	yes	
Q14.18R	Offered and Used work family programs	150
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	• M missing	
	• M invali response	
N	no	
Y	yes	
Q14.19R	Offered and Used family orientation	151
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	• M missing	
	• M invali response	
N	no	
Y	yes	
Q15MEAN	Mean score willing to use service	152
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Left	
Q15R	recoded mean score willing to use sevice	153
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Right	
Q16SUM	Item 16 sum of critical incidents	154
	Measurement level: Scale	
	Format: F8 Column Width: Unknown Alignment: Left	
Q18SUM	Item 18 sum of symptoms	155
	Measurement level: Scale	
	Format: F8 Column Width: Unknown Alignment: Left	



# FINAL TENNESSEE LAW ENFORCEMENT OFFICER QUESTIONNAIRE

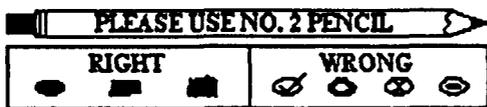
## AGENCY CODE NUMBER

- East
- Middle
- West

- 
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This work is sponsored by the National Institute of Justice grant awarded to the Tennessee Sheriff Association. The purpose of this survey is to better understand how the job impacts officers throughout the state of Tennessee. By completing this questionnaire you will be assisting in the development of programs specifically designed for officers and their family members. All information provided will remain confidential. The goal is not to identify specific agencies or officer but instead to identify overall trends. Your response is important to us and the law enforcement community in Tennessee.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- Do NOT use ink or ball point pens.
- Make heavy black marks that fill the bubble completely.
- Erase cleanly any you wish to change.
- Make no stray marks on this sheet.

**DO NOT FOLD, TEAR OR MUTILATE**

### 1. GENDER

- Male
- Female

### 2. AGE

- 
- 
- 
- 
- 
- 
- 
- 
- 
- 

### 3. What is your highest level of education?

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

### 4. What is your race (ethnicity)?

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

### 5. Have you ever served full time on active duty in the U.S. Military?

- Yes  No

### 6. What is your rank within the department?

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

### 7. Primary duties at this time:

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

### 8. Number of years service in law enforcement?

- 
- 
- 
- 
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### 9. Type of Agency:

- City
- County
- State

### 10. Marital Status:

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

### 11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

### 12. Do any preschool children live with you?

- Yes  No

### 13. Do you or your spouse care for an elderly parent or relative?

- Yes  No

14. The following are programs / services that may be offered by your agency. For each:

- First, indicate if you believe that your agency offers the programs / service. Select ? if you are not sure.
- Second, indicate if you have ever used the program / service.

	Does your agency offer this program / service?			Have you ever used this program / service?	
	Yes	No	?	Yes	No
14.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. How willing would you be to use the program / service listed? Indicate your willingness using the scale.

	Definitely would not use service	Probably would not use service	Unsure	Probably would use service	Definitely would use service
15.1 Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.2 Counseling.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.3 Marital and child support groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.4 Stress reduction programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.5 Hypertension clinics.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.6 Health and Wellness programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.7 Group therapy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.8 Post-shooting debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.9 Training/seminars on domestic violence.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.10 Stress education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.11 Critical incident stress debriefing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.12 Counseling for exposure to HIV virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.13 Peer support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.14 Short term counseling (under 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.15 Long term counseling (over 6 months) related to a line of duty death.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.16 Family issues related to firearm safety.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.17 Seminar regarding alcohol, drug use, gambling, or over eating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.18 Programs geared towards work and family issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.19 Family orientation programs (spouse awareness, visiting department).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. The following is a list of critical incidents that you may have experienced on the job. Please identify those incidents that you have experienced in your law enforcement career.

		Yes	No
<input type="checkbox"/>	16.1 Violent death of a fellow officer in the line of duty	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.2 Taking a life in the line of duty	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.3 Shooting someone in the line of duty	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.4 Suicide of an officer who was a close friend	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.5 Responding to the scene of gruesome suicide or homicide	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.6 Suicide by police	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.7 A duty related disabling injury to yourself	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.8 Duty related violent injury or death to a violator	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.9 Violent job related injury to another officer	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.10 High speed pursuits resulting in an injury or death	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.11 Pursuit of an armed suspect	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.12 Answering a call to a scene of the violent non-accidental death of a child	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.13 Brutal child abuse cases	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.14 Personal involvement in a shooting incident	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.15 Hostage situations	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.16 Prolonged exposure to an incident (hostage situation) or rescue attempts that end in death	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.17 Barricaded suspects	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.18 Responding to the scene involving the accidental death of a child.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.19 Multiple fatality automobile accident	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.20 Plane crashes involving injury or death	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.21 Man-made disasters (bombing, etc) involving injury or death	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	16.22 Natural disasters (floods, hurricanes, tomadoes, etc)	<input type="radio"/>	<input type="radio"/>

17. Have any of the critical incidents listed above or other similar situations caused you to experience strong emotional reactions that have interfered with your ability to function either at the scene or later?

Yes  No

18. After experiencing a critical incident in your job, have you experienced any of the following:

		Yes	No
<input type="checkbox"/>	18.1 Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.2 Found yourself recalling the event, including images, thought or perceptions.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.3 Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.4 Reacted to cues that symbolize / resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.5 Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.6 Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.7 Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.8 Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.9 At times felt like you had no feelings (frozen feelings).	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.10 Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.11 Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.12 Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.13 Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.14 Felt somewhat hopeless about the future	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.15 Found yourself being hyper vigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.16 Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>	18.17 Experienced sexual difficulties.	<input type="radio"/>	<input type="radio"/>

## First and last data records for CISD time1, time2, time3

The variables are listed in the following order:

LINE 1: REGION DEPT CLIENT FORM TEAM GENDER  
LINE 2: AGE ED RACE MILITARY RANK DUTIES  
LINE 3: YEARS AGENCY MARITAL NUMMAR PRESCHOL ELDER  
LINE 4: DEFUSE IES1 IES2 IES3 IES4 IES5 IES6  
LINE 5: IES7 IES8 IES9 IES10 IES11 IES12 IES13  
LINE 6: IES14 IES15 IES16 IES17 IES18 IES19 IES20  
LINE 7: IES21 IES22 RIES1 RIES2 RIES3 RIES4 RIES5  
LINE 8: RIES6 RIES7 RIES8 RIES9 RIES10 RIES11 RIES12  
LINE 9: RIES13 RIES14 RIES15 RIES16 RIES17 RIES18 RIES19  
LINE 10: RIES20 RIES21 RIES22 IESSCAL1 IESSCAL2 IESSCAL3 SUMIES  
LINE 11: SWLS1 SWLS2 SWLS3 SWLS4 SWLS5 RSWLS1 RSWLS2  
LINE 12: RSWLS3 RSWLS4 RSWLS5 SUMSWLS DASS1 DASS2 DASS3  
LINE 13: DASS4 DASS5 DASS6 DASS7 DASS8 DASS9 DASS10  
LINE 14: DASS11 DASS12 DASS13 DASS14 RDASS1 RDASS2 RDASS3  
LINE 15: RDASS4 RDASS5 RDASS6 RDASS7 RDASS8 RDASS9 RDASS10  
LINE 16: RDASS11 RDASS12 RDASS13 RDASS14 SUMDASS SYMP1 SYMP2  
LINE 17: SYMP3 SYMP4 SYMP5 SYMP6 SYMP7 SYMP8 SYMP9  
LINE 18: SYMP10 SYMP11 SYMP12 SYMP13 SYMP14 SYMP15 SYMP16  
LINE 19: SUMSYMP JOBSAT STYLE SELF FAMILY USESER EAP1  
LINE 20: COUNSEL1 FAMGP1 PEERGP1 TRAIN1 SUMUSE1 FAMUSE EAP2  
LINE 21: COUNSEL2 FAMGP2 PEERGP2 TRAIN2 SUMUSE2 SICK DOCTOR  
LINE 22: SICK2 STOMACH APPETITE BACK HEAD DIZZ  
LINE 23: HBLOOD CHEST HEART SLEEP ASTHMA  
LINE 24: DISBETES OTHER SUMHEALT FIRST TALK1 TALK2  
LINE 25: TALK3 TALK4 CI1 CI2 CI3 CI4  
LINE 26: CI5 CI6 CI7 CI8 CI9  
LINE 27: CI10 CI11 CI12 CI13 CI14  
LINE 28: CI15 CI16 CI17 CI18 CI19  
LINE 29: CI20 CI21 CI22 CI23 CI24 SUMCI FILTER\_\$  
LINE 30: VAR00001

**FIRST CASE**

REGION:	1.00	77.00	7.00	1.00	114.00 M		
AGE:	43.00	2.00	4.00 N	7.00	1.00	1.00	
YEARS:	24.00	1.00	5.00	2.00 N	N		
DEFUSE: Y		3.00	2.00	3.00	2.00	2.00	1.00
IES7:	2.00	1.00	3.00	1.00	2.00	2.00	3.00
IES14:	2.00	2.00	2.00	1.00	1.00	1.00	1.00
IES21:	2.00	1.00	3.00	1.00	3.00	1.00	1.00
RIES6:	.00	1.00	.00	3.00	.00	1.00	1.00
RIES13:	3.00	1.00	1.00	1.00	.00	.00	.00
RIES20:	.00	1.00	.00	11.00	7.00	4.00	22.00
SWLS1:	3.00	2.00	2.00	2.00	3.00	5.00	6.00
RSWLS3:	6.00	6.00	5.00	28.00	2.00	4.00	3.00
DASS4:	3.00	4.00	4.00	4.00	4.00	3.00	4.00
DASS11:	4.00	4.00	4.00	4.00	2.00	.00	1.00
RDASS4:	1.00	.00	.00	.00	.00	1.00	.00
RDASS11:	.00	.00	.00	.00	5.00 N	Y	
SYMP3: N	N	N	N	Y	N	Y	
SYMP10: N	Y	N	Y	N	Y	N	
SUMSYMP:	6.00	4.00	6.00	1.00	1.00 Y	N	
COUNSEL1: N	N	Y	N		1.00 N	N	
COUNSEL2: N	N	N	N		.00 N	N	
SICK2: N		1.00	1.00		1.00	1.00	1.00
HBLOOD:	1.00	.	.	.	1.00	.	.
DISBETES:	.	.	7.00	.	2.00	.	.
TALK3:	.	.	.	1.00	.	.	.
CI5:	.	.	.	.	.	.	.
CI10:	.	.	.	.	.	.	.
CI15:	.	.	.	.	.	.	.
CI20:	.	.	.	.	.	.	1.00 1
VAR00001:	1.00						

**LAST CASE**

REGION:	2.00	103.00	1.00	3.00	221.00 M		
AGE:	27.00	2.00	4.00 N	7.00	4.00		
YEARS:	3.00	2.00	2.00	2.00 Y	N		
DEFUSE: N		2.00	1.00	2.00	1.00	1.00	2.00
IES7:	1.00	1.00	3.00	1.00	1.00	1.00	1.00
IES14:	1.00	2.00	2.00	1.00	1.00	1.00	3.00
IES21:	3.00	1.00	1.00	.00	1.00	.00	.00
RIES6:	1.00	.00	.00	3.00	.00	.00	.00
RIES13:	.00	.00	1.00	1.00	.00	.00	.00
RIES20:	3.00	3.00	.00	10.00	.00	4.00	14.00
SWLS1:	2.00	2.00	1.00	2.00	2.00	6.00	6.00
RSWLS3:	7.00	6.00	6.00	31.00	3.00	4.00	3.00
DASS4:	4.00	4.00	4.00	4.00	4.00	4.00	4.00
DASS11:	4.00	4.00	4.00	4.00	1.00	.00	1.00
RDASS4:	.00	.00	.00	.00	.00	.00	.00
RDASS11:	.00	.00	.00	.00	2.00 Y	Y	
SYMP3: N	N	N	N	N	N	N	
SYMP10: N	N	N	N	N	N	N	
SUMSYMP:	2.00	6.00	6.00	1.00	2.00 N	N	
COUNSEL1: N	N	N	N		.00 N	N	
COUNSEL2: N	N	N	N		.00 N	N	
SICK2: N		.	.	.	.	.	.
HBLOOD:	.	.	.	.	.	.	.
DISBETES:	.	.	.00	1.00	1.00	1.00	1.00
TALK3:	.	.	.	.	.	.	.
CI5:	.	.	.	.	.	.	.
CI10:	.	.	.	.	.	.	.
CI15:	.	.	.	.	.	.	.

CI20: . . . . . 1.00 1.00 1  
VAR00001: 329.00

Number of cases read: 2      Number of cases listed: 2

# DATA DICTIONARY FOR CISD TIME1, TIME2 TIME3

File Type: SPSS Data File

Creation Date: 26 Jul 99

Creation Time: 18:29:10

Label: Not Available

N of Cases: 329

Total # of Defined Variable Elements: 189

# of Named Variables: 189

Data Are Not Weighted

Data Are Compressed

File Has Same Byte Order As Host

File Contains Case Data

File Contains No Variable Sets

File Contains No Trends Date Information

File Contains No Multiple Response Definitions

File Contains No Data Entry for Windows Information

File Contains No TextSmart Information

File Is Compatible with SPSS Releases Prior to 7.5

Variable Information:

Name		Position
REGION	region Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	1
	Value    Label	
	1.00    east	
	2.00    middle	
	3.00    west	
DEPT	department Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	2
CLIENT	client id number Measurement level: Scale Format: F11.2 Column Width: Unknown Alignment: Right	3
FORM	cisd form Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	4
	Value    Label	
	1.00    initial	
	2.00    2 weeks	
	3.00    3 months	
TEAM	team identification number Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	5
GENDER	gender Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	6
	Value    Label	
	F            female	
	M            male	
AGE	age Measurement level: Scale Format: F11.2 Column Width: Unknown Alignment: Right	7

**ED** highest level of education 8  
Measurement level: Ordinal  
Format: F11.2 Column Width: Unknown Alignment: Right

Value	Label
1.00	high school
2.00	some college
3.00	associate degree
4.00	bachelor degree
5.00	some graduate work
6.00	graduate degree

**RACE** ethnicity 9  
Measurement level: Ordinal  
Format: F11.2 Column Width: Unknown Alignment: Right

Value	Label
1.00	african american
2.00	american indian/alaskan native
3.00	asian pacific islander
4.00	white
5.00	hispanic

**MILITARY** served on active duty in military 10  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

**RANK** rank within department 11  
Measurement level: Ordinal  
Format: F11.2 Column Width: Unknown Alignment: Right

Value	Label
1.00	corporal
2.00	seargent
3.00	lieutnet
4.00	captain or higher
5.00	chief of police
6.00	sheriff
7.00	no rank

DUTIES      primary duties      12  
Measurement level: Ordinal  
Format: F11.2   Column Width: Unknown   Alignment: Right

Value	Label
1.00	patrol officer
2.00	detective investigator
3.00	communications
4.00	jailer
5.00	narcotic vice
6.00	administrative
7.00	court or process server
8.00	juvenile

YEARS      years in law enforcement      13  
Measurement level: Scale  
Format: F11.2   Column Width: Unknown   Alignment: Right

AGENCY      type of agency      14  
Measurement level: Ordinal  
Format: F11.2   Column Width: Unknown   Alignment: Right

Value	Label
1.00	city
2.00	county
3.00	state

MARITAL      marital status      15  
Measurement level: Ordinal  
Format: F11.2   Column Width: Unknown   Alignment: Right

Value	Label
1.00	single nver married
2.00	currently married
3.00	seperated
4.00	widowed not remarried
5.00	divorced not remarried
6.00	live together not married

NUMMAR	number of times married Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	16
	Value    Label  1.00    none 2.00    one 3.00    two 4.00    three 5.00    four or more	
PRESCHOL	preschool child lives with you Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	17
	Value    Label  M    missing *          M    invalid response N          no Y          yes	
ELDER	care for elderly relative Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	18
	Value    Label  M    missing *          M    invalid response N          no Y          yes	
DEFUSE	participated in defusing Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	19
	Value    Label  M    missing *          M    invalid response N          no Y          yes	

IES1	ies1 reminder brought back feelings about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	20
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES2	trouble staying asleep Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	21
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES3	other things made me think about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	22
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES4	felt irritable and angry Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	23
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	

IES5	avoid get upset when think about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	24										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES6	thought about it when not mean to Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	25										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES7	felt it was not real Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	26										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES8	stayed away from reminders Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	27										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											

IES9 pictures about it popped into my mind 28  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES10 jumpy and easily startled 29  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left.

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES11 tried not to think about it 30  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES12 aware had feelings not deal with them 31  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES13	feelings were numb Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	32										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES14	act felt like back in time Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	33										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES15	trouble falling asleep Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	34										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES16	waves of strong feelings Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	35										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											

IES17	<p>tried to remove from memory</p> <p>Measurement level: Ordinal</p> <p>Format: F8.2 Column Width: 8 Alignment: Left</p> <p>Value    Label</p> <p>1.00    not alt all</p> <p>2.00    rarely</p> <p>3.00    sometimes</p> <p>4.00    often</p>	36
IES18	<p>trouble concentrating</p> <p>Measurement level: Ordinal</p> <p>Format: F8.2 Column Width: 8 Alignment: Left</p> <p>Value    Label</p> <p>1.00    not alt all</p> <p>2.00    rarely</p> <p>3.00    sometimes</p> <p>4.00    often</p>	37
IES19	<p>reminders cause physical reactions</p> <p>Measurement level: Ordinal</p> <p>Format: F8.2 Column Width: 8 Alignment: Left</p> <p>Value    Label</p> <p>1.00    not alt all</p> <p>2.00    rarely</p> <p>3.00    sometimes</p> <p>4.00    often</p>	38
IES20	<p>dream about it</p> <p>Measurement level: Ordinal</p> <p>Format: F8.2 Column Width: 8 Alignment: Left</p> <p>Value    Label</p> <p>1.00    not alt all</p> <p>2.00    rarely</p> <p>3.00    sometimes</p> <p>4.00    often</p>	39

IES21	felt on guard Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	40
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES22	ies22 try not to talk about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	41
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
RIES1	recode ies1 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	42
RIES2	recoded ies2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	43
RIES3	recoded ies3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	44
RIES4	recoded ies4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	45
RIES5	recoded ies5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	46
RIES6	recoded ies6 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	47
RIES7	recoded ies7 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	48

RIES8	recoded ies8 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	49
RIES9	recoded ies9 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	50
RIES10	recoded ies10 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	51
RIES11	recoded ies11 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	52
RIES12	recoded ies12 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	53
RIES13	recoded ies13 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	54
RIES14	recoded ies14 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	55
RIES15	recoded ies15 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	56
RIES16	recoded ies16 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	57
RIES17	recoded ies17 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	58
RIES18	recoded ies18 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	59
RIES19	recoded ies19 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	60
RIES20	recoded ies20 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	61

RIES21	recoded ies21 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	62
RIES22	recoded ies22 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	63
IESSCAL1	intrusion subscale items 1,2,3,6,9,16,20 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	64
IESSCAL2	avoidance subscale items 5,7,8,11,12,13,17,22 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	65
IESSCAL3	hyperarousal subscale items 4,10,14,15,18,19,21 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	66
SUMIES	sum of ies subcales Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	67
SWLS1	swls1 life close to ideal Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	68
	Value      Label	
	1.00      strongly agree	
	2.00      agree	
	3.00      slightly agree	
	4.00      neither agree disagree	
	5.00      slightly disagree	
	6.00      disagree	
	7.00      strongly disagree	
SWLS2	conditions of life excellent Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	69
	Value      Label	
	1.00      strongly agree	
	2.00      agree	
	3.00      slightly agree	
	4.00      neither agree disagree	
	5.00      slightly disagree	
	6.00      disagree	
	7.00      strongly disagree	

SWLS3 satisfied with my life 70  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS4 gotten important things want in life 71  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS5 swls5 would not change life if do over 72  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

RSWLS1 recoded swls1 73  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS2 recoded swls2 74  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS3	recoded swls3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	75
RSWLS4	recoded swls4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	76
RSWLS5	recoded swls5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	77
SUMSWLS	sum score swls Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	78
DASS1	dass1 hard to wind down Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	79
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS2	hard to calm down after upset Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	80
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS3	difficult to relax Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	81
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	

DASS4	use lot nervous energy Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	82
	Value      Label  1.00      apply most of the time 2.00      apply good part of time 3.00      apply some of the time 4.00      not apply at all	
DASS5	in state of nervous tension Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	83
	Value      Label  1.00      apply most of the time 2.00      apply good part of time 3.00      apply some of the time 4.00      not apply at all	
DASS6	get upset easily Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	84
	Value      Label  1.00      apply most of the time 2.00      apply good part of time 3.00      apply some of the time 4.00      not apply at all	
DASS7	get upset by trivial things Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	85
	Value      Label  1.00      apply most of the time 2.00      apply good part of time 3.00      apply some of the time 4.00      not apply at all	

DASS8	got agitated Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	86
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS9	tend to over-react Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	87
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS10	was very irritable Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	88
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS11	was rather touchy Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	89
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	

DASS12	intolerent of anything Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	90
	Value    Label	
	1.00    apply most of the time	
	2.00    apply good part of time	
	3.00    apply some of the time	
	4.00    not apply at all	
DASS13	impatient when delayed Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	91
	Value    Label	
	1.00    apply most of the time	
	2.00    apply good part of time	
	3.00    apply some of the time	
	4.00    not apply at all	
DASS14	dass14 not tollerate interruptions Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	92
	Value    Label	
	1.00    apply most of the time	
	2.00    apply good part of time	
	3.00    apply some of the time	
	4.00    not apply at all	
RDASS1	recoded dass1 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	93
RDASS2	recoded dass2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	94
RDASS3	recoded dass3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	95
RDASS4	recoded dass4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	96

RDASS5	recoded dass5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	97
RDASS6	recoded dass6 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	98
RDASS7	recoded dass7 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	99
RDASS8	recoded dass8 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	100
RDASS9	recoded dass9 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	101
RDASS10	recoded dass10 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	102
RDASS11	recoded dass11 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	103
RDASS12	recoded dass12 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	104
RDASS13	recoded dass13 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	105
RDASS14	recoded dass14 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	106
SUMDASS	sum score recoded dass Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	107

SYMP1      symp1 dream about events      108  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP2      recall event      109  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP3      relive event      110  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP4      react to cues      111  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP5      avoid thoughts, feelings, cnversation      112  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

SYMP6      avoid people. places recall event      113  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

SYMP7      unable to recall aspects      114  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP8      detached isolated      115  
 Measurement level: Nominal  
 Format: A8 Column Width: 8 Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
•	M invali response
N	no
Y	yes

SYMP9 had no feelings 116  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
M	missing
•	M invali response
N	no
Y	yes

SYMP10 less interest in doing things 117  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
M	missing
*	M invali response
N	no
Y	yes

SYMP11 sleep problems 118  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
M	missing
*	M invali response
N	no
Y	yes

SYMP12 outburst of anger 119  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
M	missing
*	M invali response
N	no
Y	yes

SYMP13	difficult cncentrate Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	120
	Value    Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SYMP14	felt hopeless Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	121
	Value    Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SYMP15	hypervigilant Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	122
	Value    Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SYMP16	symp16 startled Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	123
	Value    Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SUMSYMP	sum of PTS symptions Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	124

JOB SAT      change in job satisfaction      125  
Measurement level: Ordinal  
Format: F8.2    Column Width: 8    Alignment: Left

Value	Label
1.00	less enjoyable
2.00	
3.00	
4.00	no change
5.00	
6.00	
7.00	more enjoyable

STYLE      change style of law enforcement      126  
Measurement level: Ordinal  
Format: F8.2    Column Width: 8    Alignment: Left

Value	Label
1.00	less involved
2.00	
3.00	
4.00	no change
5.00	
6.00	
7.00	more involved

SELF      useful debrief after incident      127  
Measurement level: Ordinal  
Format: F8.2    Column Width: 8    Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

FAMILY      useful for family debriefing      128  
 Measurement level: Ordinal  
 Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

USESER      use service since incidnet      129  
 Measurement level: Nominal  
 Format: A8   Column Width: 8   Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

EAP1      used eap      130  
 Measurement level: Nominal  
 Format: A8   Column Width: 8   Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

COUNSEL1      used counseling      131  
 Measurement level: Nominal  
 Format: A8   Column Width: 8   Alignment: Left  
 Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

FAMGP1 use family support 132  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value Label

• M missing  
M invali response  
N no  
Y yes

PEERGP1 use peer support 133  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value Label

• M missing  
M invali response  
N no  
Y yes

TRAIN1 attended training 134  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value Label

• M missing  
M invali response  
N no  
Y yes

SUMUSE1 sum of services used by officer 135  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

FAMUSE family member use service 136  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value Label

\* M missing  
M invali response  
N no  
Y yes

EAP2 family use eap 137  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

COUNSEL2 family use counseling 138  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invalid response
N		no
Y		yes

FAMGP2 family use counseling 139  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invalid response
N		no
Y		yes

PEERGP2 family use peer support 140  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
•	M	invalid response
N		no
Y		yes

TRAIN2	family use training	141
	Measurement level: Nominal	
	Format: A8 Column Width: 8 Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SUMUSE2	sume of service used by family members	142
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Right	
SICK	use sick leave	143
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
DOCTOR	seen doctor	144
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
SICK2	wanted to call in but did not	145
	Measurement level: Nominal	
	Format: A8 Column Width: Unknown Alignment: Left	
STOMACH	symp stomach	146
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
APPETITE	symp2 loss appitite	147
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
BACK	symp3 backache	148
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
HEAD	symp4 headache	149
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
DIZZ	symp5 dizziness	150
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
HBLOOD	symp6 high BP	151
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	

CHEST	symp7 chest pain Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	152
HEART	symp8 heart trouble Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	153
SLEEP	symp9 sleeplessness Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	154
ASTHMA	symp10 asthma Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	155
DISBETES	symp11 diabetes Measurement level: Ordinal  Format: F11.2 Column Width: Unknown Alignment: Right	156
OTHER	symp12 other Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	157
SUMHEALT	sum of health related problems Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	158
FIRST	when first talk about incident? Measurement level: Scale Format: F11.2 Column Width: Unknown Alignment: Right  Value      Label  1.00      still have not 2.00      within 3 days 3.00      within first week	159
TALK1	talked to family member Measurement level: Scale Format: F11.2 Column Width: Unknown Alignment: Right	160
TALK2	talk with close friend Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	161
TALK3	talk with clergy Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	162

TALK4	talked with no one Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	163
CI1	violent of partner on job Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	164
CI2	take a life on job Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	165
CI3	shoot other on job Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	166
CI4	suicide of friend officer Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	167
CI5	resond to gruesome suicide Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	168
CI6	suicide by police . Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	169
CI7	violent death of officer on job Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	170
CI8	duty related violent injury Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	171
CI9	violmnt job related injury to other officer Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	172
CI10	high speed pursuit Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	173
CI11	pursuit armed suspect Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	174
CI12	death child nonaccident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	175

CI13	child abuse Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	176
CI14	personal involve in shooting accident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	177
CI15	hostage Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	178
CI16	prolonged exposure to incident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	179
CI17	barricaded suspects Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	180
CI18	accidental death of child Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	181
CI19	auto accident fatality Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	182
CI20	plane crash Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	183
CI21	man made disaster Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	184
CI22	natural disaster Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	185
CI23	death notification Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	186
CI24	other Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	187
SUMCI	sum of type of critical incident Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	188

FILTER\_\$ form = 1 (FILTER)  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

189

Value	Label
0	Not Selected
1	Selected

## First and last data records for CISD matched subjects time1 & time2

The variables are listed in the following order:

LINE 1: REGION DEPT CLIENT NEWID FORM TEAM  
LINE 2: GENDER AGE ED RACE MILITARY RANK  
LINE 3: DUTIES YEARS AGENCY MARITAL NUMMAR PRESCHOL  
LINE 4: ELDER DEFUSE IES1 IES2 IES3 IES4 IES5  
LINE 5: IES6 IES7 IES8 IES9 IES10 IES11 IES12  
LINE 6: IES13 IES14 IES15 IES16 IES17 IES18 IES19  
LINE 7: IES20 IES21 IES22 RIES1 RIES2 RIES3 RIES4  
LINE 8: RIES5 RIES6 RIES7 RIES8 RIES9 RIES10 RIES11  
LINE 9: RIES12 RIES13 RIES14 RIES15 RIES16 RIES17 RIES18  
LINE 10: RIES19 RIES20 RIES21 RIES22 IESSCAL1 IESSCAL2 IESSCAL3  
LINE 11: SUMIES SWLS1 SWLS2 SWLS3 SWLS4 SWLS5 RSWLS1  
LINE 12: RSWLS2 RSWLS3 RSWLS4 RSWLS5 SUMSWLS DASS1 DASS2  
LINE 13: DASS3 DASS4 DASS5 DASS6 DASS7 DASS8 DASS9  
LINE 14: DASS10 DASS11 DASS12 DASS13 DASS14 RDASS1 RDASS2  
LINE 15: RDASS3 RDASS4 RDASS5 RDASS6 RDASS7 RDASS8 RDASS9  
LINE 16: RDASS10 RDASS11 RDASS12 RDASS13 RDASS14 SUMDASS SYMP1  
LINE 17: SYMP2 SYMP3 SYMP4 SYMP5 SYMP6 SYMP7 SYMP8  
LINE 18: SYMP9 SYMP10 SYMP11 SYMP12 SYMP13 SYMP14 SYMP15  
LINE 19: SYMP16 SUMSYMP JOBSAT STYLE SELF FAMILY USESER  
LINE 20: EAP1 COUNSEL1 FAMGP1 PEERGP1 TRAIN1 SUMUSE1 FAMUSE  
LINE 21: EAP2 COUNSEL2 FAMGP2 PEERGP2 TRAIN2 SUMUSE2 SICK  
LINE 22: DOCTOR SICK2 STOMACH APPETITE BACK HEAD  
LINE 23: DIZZ HBLOOD CHEST HEART SLEEP  
LINE 24: ASTHMA DISBETES OTHER SUMHEALT TALK1 CI1  
LINE 25: CI2 CI3 CI4 CI5 CI6  
LINE 26: CI7 CI8 CI9 CI10 CI11  
LINE 27: CI12 CI13 CI14 CI15 CI16  
LINE 28: CI17 CI18 CI19 CI20 CI21  
LINE 29: CI22 CI23 CI24 SUMCI FILTER\_\$ IES12A IES22A  
LINE 30: IES32A IES42A IES52A IES62A IES72A

LINE 31: IES82A IES92A IES102A IES112A IES122A  
LINE 32: IES132A IES142A IES152A IES162A IES172A  
LINE 33: IES182A IES192A IES202A IES212A IES222A RIES12A  
LINE 34: RIES22A RIES32A RIES42A RIES52A RIES62A RIES72A RIES82A  
LINE 35: RIES92A RIES102A RIES112A RIES122A RIES132A RIES142A RIES152A  
LINE 36: RIES162A RIES172A RIES182A RIES192A RIES202A RIES212A RIES222A  
LINE 37: IESSL12A IESSL22A IESSL32A SUMIES2A SWLS12A SWLS22A  
LINE 38: SWLS32A SWLS42A SWLS52A RSWLS12A RSWLS22A RSWLS32A  
LINE 39: RSWLS42A RSWLS52A SUMSWL2A DASS12A DASS22A DASS32A  
LINE 40: DASS42A DASS52A DASS62A DASS72A DASS82A  
LINE 41: DASS92A DASS102A DASS112A DASS122A DASS132A  
LINE 42: DASS142A RDASS12A RDASS22A RDASS32A RDASS42A RDASS52A RDASS62A  
LINE 43: RDASS72A RDASS82A RDASS92A RDAS102A RDAS112A RDAS122A RDAS132A  
LINE 44: RDAS142A SUMDAS2A SYMP12A SYMP22A SYMP32A SYMP42A SYMP52A  
LINE 45: SYMP62A SYMP72A SYMP82A SYMP92A SYMP102A SYMP112A SYMP122A  
LINE 46: SYMP132A SYMP142A SYMP152A SYMP162A SUMSYM2A JOBSAT2A STYLE2A  
LINE 47: SELF2A FAMILY2A USESER2A EAP12A COUN12A FAMGP12A PEER12A  
LINE 48: TRAIN12A SUMUS12A FAMUSE2A EAP22A COUN22A FAMGP22A PEER22A  
LINE 49: TRAIN22A SUMUS22A SICK2A DOCTOR2A SICK22A STOMAC2A APPET2A  
LINE 50: BACK2A HEAD2A DIZZ2A HBLOOD2A CHEST2A  
LINE 51: HEART2A SLEEP2A ASTHMA2A DISBET2A OTHER2A SUMHLT2A  
LINE 52: TALK12A TALK22A TALK32A TALK42A CI12A  
LINE 53: CI22A CI32A CI42A CI52A CI62A  
LINE 54: CI72A CI82A CI92A CI102A CI112A  
LINE 55: CI122A CI132A CI142A CI152A CI162A  
LINE 56: CI172A CI182A CI192A CI202A CI212A  
LINE 57: CI222A CI232A CI242A SUMCI2A VAR00001

**FIRST CASE**

REGION:	2.00	131.00	1.00	1	1.00	89.00
GENDER: M		27.00	2.00	4.00 Y		2.00
DUTIES:	.	7.00	2.00	2.00	3.00 N	
ELDER: N	Y	4.00	4.00	4.00	4.00	3.00
IES6:	4.00	3.00	4.00	4.00	3.00	4.00
IES13:	3.00	3.00	4.00	4.00	3.00	3.00
IES20:	4.00	4.00	4.00	5.00	5.00	5.00
RIES5:	3.00	5.00	3.00	5.00	5.00	3.00
RIES12:	3.00	3.00	3.00	5.00	5.00	3.00
RIES19:	3.00	5.00	5.00	5.00	35.00	30.00
						27.00
SUMIES:	92.00	2.00	2.00	6.00	2.00	6.00
RSWLS2:	6.00	2.00	6.00	2.00	22.00	1.00
DASS3:	1.00	2.00	1.00	1.00	2.00	2.00
DASS10:	1.00	3.00	.	3.00	3.00	3.00
RDASS3:	3.00	2.00	3.00	3.00	2.00	2.00
RDASS10:	3.00	1.00	.	1.00	1.00	29.00 Y
SYMP2: Y	Y	Y	Y	Y	N	Y
SYMP9: Y	Y	Y	N	N	Y	Y
SYMP16: Y		13.00	2.00	2.00	1.00	1.00 N
EAP1: N	N	N	N	N		.00 N
EAP2: N	N	N	N	N		.00 N
DOCTOR: N	N		1.00	1.00		1.00
DIZZ:	.	.	.	.	.	1.00
ASTHMA:	.	.	.	4.00	2.00	.
CI2:	.	.	.	.	.	.
CI7:	.	.	.	1.00	.	.
CI12:	.	.	.	.	.	1.00
CI17:	.	.	.	.	.	.
CI22:	.	1.00	.	3.00 1	.	.
IES32A:	.	.	.	.	.	.
IES82A:	.	.	.	.	.	.
IES132A:	.	.	.	.	.	.
IES182A:	.	.	.	.	.	.
RIES22A:	.	.	.	.	.	.
RIES92A:	.	.	.	.	.	.
RIES162A:	.	.	.	.	.	.
IESSL12A:	.	.	.	.	.	.
SWLS32A:	.	.	.	.	.	.
RSWLS42A:	.	.	.	.	.	.
DASS42A:	.	.	.	.	.	.
DASS92A:	.	.	.	.	.	.
DASS142A:	.	.	.	.	.	.
RDASS72A:	.	.	.	.	.	.
RDAS142A:	.	.	.	.	.	.
SYMP62A:	.	.	.	.	.	.
SYMP132A:	.	.	.	.00	.	.
SELF2A:	.	.	.	.	.	.
TRAIN12A:	.	.00	.	.	.	.
TRAIN22A:	.	.00	.	.	.	.
BACK2A:	.	.	.	.	.	.
HEART2A:	.	.	.	.	.	.
TALK12A:	.	.	.	.	.	.

CI22A: . . . . .  
 CI72A: . . . . .  
 CI122A: . . . . .  
 CI172A: . . . . .  
 CI222A: . . . . . 1.00

LAST CASE

REGION: . . . . . 236  
 GENDER: . . . . .  
 DUTIES: . . . . .  
 ELDER: . . . . .  
 IES6: . . . . .  
 IES13: . . . . .  
 IES20: . . . . .  
 RIES5: . . . . .  
 RIES12: . . . . .  
 RIES19: . . . . .  
 SUMIES: . . . . .  
 RSWLS2: . . . . .  
 DASS3: . . . . .  
 DASS10: . . . . .  
 RDASS3: . . . . .  
 RDASS10: . . . . .  
 SYMP2: . . . . .  
 SYMP9: . . . . .  
 SYMP16: . . . . . 0.00  
 EAP1: . . . . . 0.00  
 EAP2: . . . . . 0.00  
 DOCTOR: . . . . .  
 DIZZ: . . . . .  
 ASTHMA: . . . . .  
 CI2: . . . . .  
 CI7: . . . . .  
 CI12: . . . . .  
 CI17: . . . . .  
 CI22: . . . . . 1 3.00 1.00  
 IES32A: 3.00 1.00 2.00 2.00 3.00  
 IES82A: 1.00 3.00 2.00 1.00 1.00  
 IES132A: 1.00 1.00 1.00 1.00 1.00  
 IES182A: 1.00 1.00 1.00 1.00 2.00 3.00  
 RIES22A: .00 3.00 .00 1.00 1.00 3.00 .00  
 RIES92A: 3.00 1.00 .00 .00 .00 .00 .00  
 RIES162A: .00 .00 .00 .00 .00 .00 1.00  
 IESSL12A: 10.00 4.00 1.00 15.00 2.00 2.00  
 SWLS32A: 2.00 2.00 3.00 6.00 6.00 6.00  
 RSWLS42A: 6.00 5.00 29.00 4.00 3.00 4.00  
 DASS42A: 4.00 4.00 4.00 4.00 4.00 4.00  
 DASS92A: 4.00 4.00 4.00 4.00 4.00 4.00  
 DASS142A: 4.00 .00 1.00 .00 .00 .00 .00  
 RDASS72A: .00 .00 .00 .00 .00 .00 .00  
 RDAS142A: .00 1.00 N Y N N N  
 SYMP62A: N N N N N N N  
 SYMP132A: N N N N 1.00 4.00 4.00  
 SELF2A: 1.00 1.00 N N N N N  
 TRAIN12A: N .00 N N N N N  
 TRAIN22A: .00 N N N N N  
 BACK2A: . . . . .

HEART2A:	.	.	.	.	.
TALK12A:	.	1.00	.	.	.
CI22A:	.	.	.	.	.
CI72A:	.	.	.	.	.
CI122A:	.	.	.	.	.
CI172A:	.	.	.	.	.
CI222A:	.	.	.	1.00	.

# DATA DICTIONARY FOR CISD MATCHED SUBJECTS FOR TIME1 & TIME2

File Type: SPSS Data File

Creation Date: 27 Jul 99

Creation Time: 12:30:12

Label: Not Available

N of Cases: 236

Total # of Defined Variable Elements: 354

# of Named Variables: 354

Data Are Not Weighted

Data Are Compressed

File Has Same Byte Order as Host

File Contains Case Data

File Contains No Variable Sets

File Contains No Trends Date Information

File Contains No Multiple Response Definitions

File Contains No Data Entry for Windows Information

File Contains No TextSmart Information

File Is Compatible with SPSS Releases Prior to 7.5

Variable Information:

Name		Position
REGION	region Measurement level: Ordinal Format: F11.2 Column Width: 8 Alignment: Right	1
	Value Label	
	1.00 east	
	2.00 middle	
	3.00 west	
DEPT	department Measurement level: Ordinal Format: F11.2 Column Width: 8 Alignment: Right Missing Values: 888.00	2
CLIENT	client id number Measurement level: Scale Format: F11.2 Column Width: 5 Alignment: Right	3
NEWID	new id developed for matching subjects Measurement level: Scale Format: F3 Column Width: Unknown Alignment: Left	4
FORM	cisd form Measurement level: Ordinal Format: F11.2 Column Width: 5 Alignment: Right	5
	Value Label	
	1.00 initial	
	2.00 2 weeks	
	3.00 3 months	
TEAM	team identification number Measurement level: Ordinal Format: F11.2 Column Width: 5 Alignment: Right	6
GENDER	gender Measurement level: Nominal Format: A8 Column Width: 6 Alignment: Left	7
	Value Label	
F	female	
M	male	

AGE	age Measurement level: Scale Format: F11.2 Column Width: 5 Alignment: Right	8
ED	highest level of education Measurement level: Ordinal Format: F11.2 Column Width: 3 Alignment: Right	9
	Value    Label	
	1.00    high school	
	2.00    some college	
	3.00    associate degree	
	4.00    bachelor degree	
	5.00    some graduate work	
	6.00    graduate degree	
RACE	ethnicity Measurement level: Ordinal Format: F11.2 Column Width: 5 Alignment: Left	10
	Value    Label	
	1.00    african american	
	2.00    american indian/alaskan native	
	3.00    asian pacific islander	
	4.00    white	
	5.00    hispanic	
MILITARY	served on active duty in military Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	11
	Value    Label	
	M    missing	
*	M    invali response	
N	no	
Y	yes	

RANK rank within department 12  
Measurement level: Ordinal  
Format: F11.2 Column Width: 5 Alignment: Left

Value	Label
1.00	corporal
2.00	seargent
3.00	lieutent
4.00	captain or higher
5.00	chief of police
6.00	sheriff
7.00	no rank

DUTIES primary duties 13  
Measurement level: Ordinal  
Format: F11.2 Column Width: 8 Alignment: Right

Value	Label
1.00	patrol officer
2.00	detective investigator
3.00	communications
4.00	jailer
5.00	narcotic vice
6.00	administrative
7.00	court or process server
8.00	juvenile

YEARS years in law enforcement 14  
Measurement level: Scale  
Format: F11.2 Column Width: 8 Alignment: Left

AGENCY type of agency 15  
Measurement level: Ordinal  
Format: F11.2 Column Width: 8 Alignment: Left

Value	Label
1.00	city
2.00	county
3.00	state

MARITAL marital status 16  
Measurement level: Ordinal  
Format: F11.2 Column Width: 8 Alignment: Left

Value	Label
1.00	single nver married
2.00	currently married
3.00	seperated
4.00	widowed not remarried
5.00	divorced not remarried
6.00	live together not married

NUMMAR number of times married 17  
Measurement level: Ordinal  
Format: F11.2 Column Width: 8 Alignment: Left

Value	Label
1.00	none
2.00	one
3.00	two
4.00	three
5.00	foour or more

PRESCHOL preschool child lives with you 18  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

ELDER care for elderly relative 19  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

DEFUSE participated in defusing 20  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

IES1 ies1 reminder brought back fellings about it 21  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES2 trouble staying asleep 22  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES3 other things made me think about it 23  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES4 felt irritable and angry 24  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES5 avoid get upset when think about it 25  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES6 thought about it when not mean to 26  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES7 felt it was not real 27  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES8	stayed away from reminders Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	28										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES9	pictures about it popped into my mind Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	29										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES10	jumpy and easily startled Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	30										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											
IES11	tried not to think about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	31										
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not alt all</td> </tr> <tr> <td>2.00</td> <td>rarely</td> </tr> <tr> <td>3.00</td> <td>sometimes</td> </tr> <tr> <td>4.00</td> <td>often</td> </tr> </tbody> </table>	Value	Label	1.00	not alt all	2.00	rarely	3.00	sometimes	4.00	often	
Value	Label											
1.00	not alt all											
2.00	rarely											
3.00	sometimes											
4.00	often											

IES12 aware had feelings not deal with them 32  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES13 feelings were numb 33  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES14 act felt like back in time 34  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES15 trouble falling asleep 35  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not alt all
2.00	rarely
3.00	sometimes
4.00	often

IES16	waves of strong feelings Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	36
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES17	tried to remove from memory Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	37
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES18	trouble concentrating Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	38
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES19	reminders cause physical reactions Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	39
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	

IES20	dream about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	40
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES21	felt on guard Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	41
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
IES22	ies22 try not to talk about it Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	42
	Value    Label	
	1.00    not alt all	
	2.00    rarely	
	3.00    sometimes	
	4.00    often	
RIES1	recode ies1 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	43
RIES2	recoded ies2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	44
RIES3	recoded ies3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	45
RIES4	recoded ies4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	46

RIES5	recoded ies5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	47
RIES6	recoded ies6 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	48
RIES7	recoded ies7 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	49
RIES8	recoded ies8 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	50
RIES9	recoded ies9 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	51
RIES10	recoded ies10 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	52
RIES11	recoded ies11 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	53
RIES12	recoded ies12 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	54
RIES13	recoded ies13 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	55
RIES14	recoded ies14 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	56
RIES15	recoded ies15 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	57
RIES16	recoded ies16 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	58
RIES17	recoded ies17 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	59

RIES18	recoded ies18 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	60
RIES19	recoded ies19 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	61
RIES20	recoded ies20 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	62
RIES21	recoded ies21 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	63
RIES22	recoded ies22 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	64
IESSCAL1	intrusion subscale items 1,2,3,6,9,16,20 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	65
IESSCAL2	avoidance subscale items 5,7,8,11,12,13,17,22 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	66
IESSCAL3	hyperarousal subscale items 4,10,14,15,18,19,21 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	67
SUMIES	sum of ies subcales Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	68
SWLS1	swls1 life close to ideal Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	69

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS2 conditions of life excellent 70  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS3 satisfied with my life 71  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS4 gotten important things want in life 72  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

SWLS5 swls5 would not change life if do over 73  
 Measurement level: Ordinal  
 Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

RSWLS1 recoded swls1 74  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS2 recoded swls2 75  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS3 recoded swls3 76  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS4 recoded swls4 77  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

RSWLS5 recoded swls5 78  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

SUMSWLS sum score swls 79  
 Measurement level: Scale  
 Format: F8.2 Column Width: Unknown Alignment: Right

DASS1 dass1 hard to wind down 80  
 Measurement level: Ordinal  
 Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS2	hard to calm down after upset Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	81
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS3	difficult to relax Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	82
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS4	use lot nervous energy Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	83
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
DASS5	in state of nervous tension Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	84
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	

DASS6      get upset easily      85  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS7      get upset by trivial things      86  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS8      got agitated      87  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS9      tend to over-react      88  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS10      was very irritable      89  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS11      was rather touchy      90  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS12      intolerent of anything      91  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS13      impatient when delayed      92  
Measurement level: Ordinal  
Format: F8.2   Column Width: 8   Alignment: Left

Value	Label
1.00	apply most of the time
2.00	apply good part of time
3.00	apply some of the time
4.00	not apply at all

DASS14	dass14 not tolerate interruptions Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	93
	Value      Label	
	1.00      apply most of the time	
	2.00      apply good part of time	
	3.00      apply some of the time	
	4.00      not apply at all	
RDASS1	recoded dass1 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	94
RDASS2	recoded dass2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	95
RDASS3	recoded dass3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	96
RDASS4	recoded dass4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	97
RDASS5	recoded dass5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	98
RDASS6	recoded dass6 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	99
RDASS7	recoded dass7 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	100
RDASS8	recoded dass8 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	101
RDASS9	recoded dass9 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	102
RDASS10	recoded dass10 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	103

RDASS11	recoded dass11 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	104
RDASS12	recoded dass12 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	105
RDASS13	recoded dass13 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	106
RDASS14	recoded dass14 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	107
SUMDASS	sum score recoded dass Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	108
SYMP1	symp1 dream about events Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	109
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
SYMP2	recall event Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	110
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	

SYMP3	relive event Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	111
	Value      Label  M missing *            M invali response N             no Y             yes	
SYMP4	react to cues Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	112
	Value      Label  M missing *            M invali response N             no Y             yes	
SYMP5	avoid thoughts, feelings, cnversation Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	113
	Value      Label  M missing *            M invali response N             no Y             yes	
SYMP6	avoid people. places recalll event Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Left Missing Values: '', '*'	114
	Value      Label  M missing *            M invali response N             no Y             yes	

SYMP7      unable to recall aspects      115  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP8      detached isolated      116  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP9      had no feelings      117  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP10     less interest in doing things      118  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP11 sleep problems 119  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP12 outburst of anger 120  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP13 difficult cncentrate 121  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SYMP14 felt hopeless 122  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes



STYLE change style of law enforcement 127  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	less involved
2.00	
3.00	
4.00	no change
5.00	
6.00	
7.00	more involved

SELF useful debrief after incident 128  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

FAMILY useful for family debriefing 129  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	strongly agree
2.00	agree
3.00	slightly agree
4.00	neither agree disagree
5.00	slightly disagree
6.00	disagree
7.00	strongly disagree

USESER use service since incidnet 130  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

EAP1 used eap 131  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

COUNSEL1 used counceling 132  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

FAMGP1 use family support 133  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

	Value	Label
	M	missing
*	M	invali response
N		no
Y		yes

PEERGP1 use peer support 134  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

TRAIN1 attended training 135  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

SUMUSE1 sum of services used by officer 136  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

FAMUSE family member use service 137  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

EAP2 family use eap 138  
Measurement level: Nominal  
Format: A8 Column Width: 8 Alignment: Left  
Missing Values: '', '\*'

Value	Label
	M missing
*	M invali response
N	no
Y	yes

COUNSEL2	family use counseling	139
	Measurement level: Nominal	
	Format: A8 Column Width: 8 Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
FAMGP2	family ise counseling	140
	Measurement level: Nominal	
	Format: A8 Column Width: 8 Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
PEERGP2	family use peer support	141
	Measurement level: Nominal	
	Format: A8 Column Width: 8 Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
*	M invali response	
N	no	
Y	yes	
TRAIN2	family use training	142
	Measurement level: Nominal	
	Format: A8 Column Width: 8 Alignment: Left	
	Missing Values: '', '*'	
	Value Label	
	M missing	
•	M invali response	
N	no	
Y	yes	
SUMUSE2	sume of service used by family members	143
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Right	

SICK	use sick leave Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	144
DOCTOR	seen doctor Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	145
SICK2	wanted to call in but did not Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	146
STOMACH	health1 stomach Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	147
APPETITE	health2 loss appetite Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	148
BACK	health3 backache Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	149
HEAD	health4 headache Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	150
DIZZ	health5 dizziness Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	151
HBLOOD	health6 high BP Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	152
CHEST	health7 chest pain Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	153
HEART	health8 heart trouble Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	154
SLEEP	health9 sleeplessness Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	155
ASTHMA	health10 asthma Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	156

DISBETES	health11 diabetes	157
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
OTHER	health12 other	158
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
SUMHEALT	sum of health related problems	159
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Right	
TALK1	first time talk to someone about the incident	160
	Measurement level: Scale	
	Format: F11.2 Column Width: Unknown Alignment: Right	
	Value Label	
	1.00 still have not talked to anyone	
	2.00 withing first 3 days	
	3.00 withing first week	
CI1	violent of partner on job	161
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI2	take a life on job	162
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI3	shoot other on job	163
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI4	suicide of friend officer	164
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI5	resond to gruesome suicide	165
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI6	suicide by police	166
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI7	violent death of officer on job	167
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	

CI8	duty related violent injury Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	168
CI9	violence job related injury to other officer Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	169
CI10	high speed pursuit Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	170
CI11	pursuit armed suspect Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	171
CI12	death child nonaccident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	172
CI13	child abuse Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	173
CI14	personal involve in shooting accident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	174
CI15	hostage Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	175
CI16	prolonged exposure to incident Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	176
CI17	barricaded suspects Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	177
CI18	accidental death of child Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	178
CI19	auto accident fatality Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	179
CI20	plane crash Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	180

CI21	man made disaster Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	181
CI22	natural disaster Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	182
CI23	death notification Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	183
CI24	other Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	184
SUMCI	sum of type of critical incident Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	185
FILTER_	sumswls >= 0 & sumswl2a >= 0 (FILTER) Measurement level: Scale Format: F1 Column Width: Unknown Alignment: Right	186
	Value      Label	
	0      Not Selected	
	1      Selected	
IES12A	ies1 time 2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	187
IES22A	ies2 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	188
IES32A	ies3 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	189
	Value      Label	
	1.00      not alt all	
	2.00      rarely	
	3.00      sometimes	
	4.00      often	
IES42A	ies4 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	190

IES52A	ies5 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	191
IES62A	ies6 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	192
IES72A	ies7 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	193
IES82A	ies8 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	194
IES92A	ies9 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	195
IES102A	ies10 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	196
IES112A	ies11 time 2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	197
IES122A	ies12 time2 Measurement level: Ordinal  Format: F11.2 Column Width: Unknown Alignment: Right	198
IES132A	ies13 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	199
IES142A	ies14 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	200
IES152A	ies15 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	201
IES162A	ies16 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	202
IES172A	ies17 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	203

IES182A	ies18 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	204
IES192A	ies19 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	205
IES202A	ies20 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	206
IES212A	ies21 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	207
IES222A	ies22 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	208
RIES12A	recode ies1 time 2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	209
RIES22A	recoded ies2 time 2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	210
RIES32A	recoded ies3 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	211
RIES42A	recoded ies4 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	212
RIES52A	recoded ies5 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	213
RIES62A	recoded ies6 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	214
RIES72A	recoded ies7 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	215
RIES82A	recoded ies8 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	216

RIES92A	recoded ies9 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	217
RIES102A	recoded ies10 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	218
RIES112A	recoded ies11 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	219
RIES122A	recoded ies12 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	220
RIES132A	recoded ies13 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	221
RIES142A	recoded ies14 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	222
RIES152A	recoded ies15 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	223
RIES162A	recoded ies16 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	224
RIES172A	recoded ies17 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	225
RIES182A	recoded ies18 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	226
RIES192A	recoded ies19 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	227
RIES202A	recoded ies20 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	228
RIES212A	recoded ies21 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	229

RIES222A	recoded ies22 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	230
IESSL12A	intrusion subscale items time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	231
IESSL22A	avoidance subscale items time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	232
IESSL32A	hyperarousal subscale items time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	233
SUMIES2A	sum of ies subcales time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	234
SWLS12A	swls1 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	235
SWLS22A	swls2 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	236
SWLS32A	swls3 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	237
SWLS42A	swls 4 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	238
SWLS52A	swls 5 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	239
RSWLS12A	recoded swls1 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	240
RSWLS22A	recoded swls2 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	241
RSWLS32A	recoded swls3 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	242

RSWLS42A	recoded swls4 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	243
RSWLS52A	recoded swls5 time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	244
SUMSWL2A	sum score of swls time 2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	245
DASS12A	dass1 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	246
DASS22A	dass2 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	247
DASS32A	dass3 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	248
DASS42A	dass4 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	249
DASS52A	dass5 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	250
DASS62A	dass6 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	251
DASS72A	dass7 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	252
DASS82A	dass8 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	253
DASS92A	dass9 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	254
DASS102A	dass10 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	255

DASS112A	dass11 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	256
DASS122A	dass12 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	257
DASS132A	dass13 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	258
DASS142A	dass14 time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	259
RDASS12A	recoded dass1 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	260
RDASS22A	recoded dass2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	261
RDASS32A	recoded dass3 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	262
RDASS42A	recoded dass4 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	263
RDASS52A	recoded dass5 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	264
RDASS62A	recoded dass6 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	265
RDASS72A	recoded dass7 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	266
RDASS82A	recoded dass8 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	267
RDASS92A	recoded dass9 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	268

RDAS102A	recoded dass10 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	269
RDAS112A	recoded dass11 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	270
RDAS122A	recoded dass12 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	271
RDAS132A	recoded dass13 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	272
RDAS142A	recoded dass14 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	273
SUMDAS2A	sum score recoded dass time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	274
SYMP12A	dreamed about events time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	275
SYMP22A	recall event time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	276
SYMP32A	relive event time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	277
SYMP42A	react to cues tme2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	278
SYMP52A	avoid time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	279
SYMP62A	avoid people time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	280
SYMP72A	can not recall time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	281

SYMP82A	felt detached time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	282
SYMP92A	no feelings time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	283
SYMP102A	less interest time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	284
SYMP112A	sleep problems time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	285
SYMP122A	anger outburst time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	286
SYMP132A	not concentrating time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	287
SYMP142A	felt hopeless time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	288
SYMP152A	hypervigilant time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	289
SYMP162A	startled time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	290
SUMSYM2A	sum of symptoms time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	291
JOBSAT2A	job satisfaciton change time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	292
STYLE2A	way do job change time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	293
SELF2A	is debriefing useful for personnel time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	294

FAMILY2A	is debriefing usfeul for family time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	295
USESER2A	you used programs time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	296
EAP12A	you use eap time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	297
COUN12A	you use counseling time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	298
FAMGP12A	you use family support group time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	299
PEER12A	you use peer suppor group time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	300
TRAIN12A	you use traning time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	301
SUMUS12A	sum of serices individual used time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	302
FAMUSE2A	family use services time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	303
EAP22A	family use eap time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	304
COUN22A	family use counceling time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	305
FAMGP22A	family use family support gp time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	306
PEER22A	family use peer support gp time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	307

TRAIN22A	family use training time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	308
SUMUS22A	sum of family services used time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	309
SICK2A	used sick leave time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	310
DOCTOR2A	been to doctor time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	311
SICK22A	wanted but did not call in sich time2 Measurement level: Nominal Format: A8 Column Width: Unknown Alignment: Left	312
STOMAC2A	health stomach time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	313
APPET2A	health2 loss of appetite time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	314
BACK2A	health3 back problems time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	315
HEAD2A	heakth4 headaches time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	316
DIZZ2A	health5 dizziness time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	317
HBLOOD2A	health6 high blood pressure time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	318
CHEST2A	health7 chest pains time3 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	319
HEART2A	health8 heart trouble time 2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	320

SLEEP2A	health9 sleeplessness time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	321
ASTHMA2A	health10 asthma time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	322
DISBET2A	health11 asthma time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	323
OTHER2A	health12 other time2 Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	324
SUMHLT2A	sume of health problems time2 Measurement level: Scale Format: F8.2 Column Width: Unknown Alignment: Right	325
TALK12A	spoke with family member Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	326
TALK22A	spoke with close friend Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	327
TALK32A	spoke with clergy Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	328
TALK42A	have talked with no one Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	329
CI12A	* No label * Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	330
CI22A	* No label * Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	331
CI32A	* No label * Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	332
CI42A	* No label * Measurement level: Ordinal Format: F11.2 Column Width: Unknown Alignment: Right	333

CI52A	* No label *	334
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI62A	* No label *	335
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI72A	• No label *	336
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI82A	* No label *	337
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI92A	* No label *	338
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI102A	* No label *	339
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI112A	* No label *	340
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI122A	* No label *	341
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI132A	* No label *	342
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI142A	• No label *	343
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI152A	* No label *	344
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI162A	* No label *	345
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI172A	* No label *	346
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	

CI182A	* No label *	347
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI192A	* No label *	348
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI202A	* No label *	349
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI212A	* No label *	350
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI222A	* No label *	351
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI232A	* No label *	352
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
CI242A	* No label *	353
	Measurement level: Ordinal	
	Format: F11.2 Column Width: Unknown Alignment: Right	
SUMCI2A	sum of critical incidents receeded time2	354
	Measurement level: Scale	
	Format: F8.2 Column Width: Unknown Alignment: Right	

**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

000  
111  
222  
333  
444  
555  
666  
777  
888  
999

**CLIENT CODE**

000  
111  
222  
333  
444  
555  
666  
777  
888  
999

**FORM NUMBER**

00  
11  
22  
33  
44  
55  
66  
77  
88  
99

**TEAM NUMBER OF INDIVIDUAL**

000  
111  
222  
333  
444  
555  
666  
777  
888  
999

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

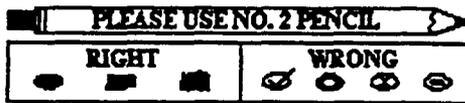
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - INITIAL**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male
- Female

**2. AGE**

00  
11  
22  
33  
44  
55  
66  
77  
88  
99

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

00  
11  
22  
33  
44  
55  
66  
77  
88  
99

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes
- No

13. Do you or your spouse care for an elderly parent or relative?

- Yes
- No

14. Have you participated in a Defusing prior to being Debriefed?

- Yes
- No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the critical incident with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. I had trouble staying asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Other things kept making me think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. I felt irritable and angry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. I thought about it when I didn't mean to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I stayed away from reminders about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Pictures about it popped into my mind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. I was jumpy and easily startled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I tried not to think about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. My feelings about it were kind of numb.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. I found myself acting or feeling like I was back at that time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. I had trouble falling asleep.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I had waves of strong feelings about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I tried to remove it from my memory.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I had trouble concentrating.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. I had dreams about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I felt watchful and on-guard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. I tried not to talk about it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

- 37. In most ways my life is close to my ideal.
- 38. The conditions of my life are excellent.
- 39. I am satisfied with my life.
- 40. So far, I have gotten the important things I want in life.
- 41. If I could live my life over, I would change almost nothing.

For each of the statements below, use the scale below to indicate how much the statement applies to you after the critical incident. There are no right or wrong answers. Do not spend too much time on any one statement.

	Applied to me very much or most of the time	Applied to me a considerable degree, or a good part of the time	Applied to me to some degree or some of the time	Did not apply to me at all
42. I found it hard to wind down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I found it hard to calm down after something upset me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I found it difficult to relax.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. I felt I was using a lot of nervous energy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. I was in a state of nervous tension.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. I found myself getting upset rather easily.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. I found myself getting upset by quite trivial things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. I found myself getting agitated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50. I tended to over-react to situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. I found that I was very irritable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. I felt that I was rather touchy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. I was intolerant of anything that kept me from getting on with what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54. I found myself getting impatient when I was delaying in any way (e.g., traffic lights, being kept waiting).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. I found it difficult to tolerate interruptions to what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Have you experienced any of the following with respect to the event?

	Yes	No
56. Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
57. Found yourself recalling the event, including images, thought or perceptions such as smells.	<input type="radio"/>	<input type="radio"/>
58. Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
59. Reacted to cues that resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
60. Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
61. Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
62. Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
63. Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
64. At times felt like you had no feelings.	<input type="radio"/>	<input type="radio"/>
65. Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
66. Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
67. Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
68. Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
69. Felt somewhat hopeless about the future.	<input type="radio"/>	<input type="radio"/>
70. Found yourself being hypervigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
71. Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Less Enjoyable	No Change	More Enjoyable
72. Has your job satisfaction changed since the critical incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Less Involved	No Change	More Involved
73. Has your style of law enforcement changed since the critical incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
74. Do you think, it is useful for personnel to have a debriefing after an incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
75. Do you think it is useful for your family members to have a debriefing to help them understand and cope with what you have experienced?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

76. Since the critical incident, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

78. Since the critical incident, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

80. As a result of this critical incident, have you

	Yes	No
Used sick leave?	<input type="checkbox"/>	<input type="checkbox"/>
Been to a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Wanted to call in sick, but didn't?	<input type="checkbox"/>	<input type="checkbox"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. When did you first talk about the incident with someone other than your supervisor or an investigator?

Still have not  
 Within the first 3 days  
 Within the first week



**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**CLIENT CODE**

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**FORM NUMBER**

0 0  
1 1  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**TEAM NUMBER OF INDIVIDUAL**

0 0 0  
1 1 1  
2 2 2  
3 3 3  
4 4 4  
5 5 5  
6 6 6  
7 7 7  
8 8 8  
9 9 9

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

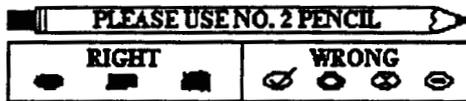
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - TWO WEEKS**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



- \* Do NOT use ink or ball point pens.
- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male
- Female

**2. AGE**

0 0  
1 1  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

0 0  
1 1  
2 2  
3 3  
4 4  
5 5  
6 6  
7 7  
8 8  
9 9

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes  No

13. Do you or your spouse care for an elderly parent or relative?

- Yes  No

14. Have you participated in a Defusing prior to being Debriefed?

- Yes  No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the last survey with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I had trouble staying asleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Other things kept making me think about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I felt irritable and angry.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. I thought about it when I didn't mean to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I stayed away from reminders about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Pictures about it popped into my mind.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I was jumpy and easily startled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I tried not to think about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. My feelings about it were kind of numb.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. I found myself acting or feeling like I was back at that time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. I had trouble falling asleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. I had waves of strong feelings about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. I tried to remove it from my memory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. I had trouble concentrating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. I had dreams about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. I felt watchful and on-guard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. I tried not to talk about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

	Strongly Disagree	
	Disagree	
	Slightly Disagree	
	Neither Agree Nor Disagree	
	Slightly Agree	
	Agree	
	Strongly Agree	

- 37. In most ways my life is close to my ideal.
- 38. The conditions of my life are excellent.
- 39. I am satisfied with my life.
- 40. So far, I have gotten the important things I want in life.
- 41. If I could live my life over, I would change almost nothing.

For each of the statements below, use the scale below to indicate how much the statement applies to you since the last survey. There are no right or wrong answers. Do not spend too much time on any one statement.

	Applied to me very much or most of the time	Applied to me a considerable degree, or a good part of the time	Applied to me to some degree or some of the time	Did not apply to me at all
42. I found it hard to wind down.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. I found it hard to calm down after something upset me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. I found it difficult to relax.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. I felt I was using a lot of nervous energy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. I was in a state of nervous tension.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. I found myself getting upset rather easily.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. I found myself getting upset by quite trivial things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. I found myself getting agitated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50. I tended to over-react to situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. I found that I was very irritable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. I felt that I was rather touchy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. I was intolerant of anything that kept me from getting on with what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
54. I found myself getting impatient when I was delayed in any way (e.g., traffic lights, being kept waiting).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
55. I found it difficult to tolerate interruptions to what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Have you experienced any of the following with respect to the event?

	Yes	No
56. Dreamed about the events.	<input type="radio"/>	<input type="radio"/>
57. Found yourself recalling the event, including images, thought or perceptions such as smells.	<input type="radio"/>	<input type="radio"/>
58. Found yourself at times reliving the event.	<input type="radio"/>	<input type="radio"/>
59. Reacted to cues that resemble an aspect of the event.	<input type="radio"/>	<input type="radio"/>
60. Avoided thoughts, feelings or conversations about the event.	<input type="radio"/>	<input type="radio"/>
61. Avoided people, places or activities that cause you to recall the event.	<input type="radio"/>	<input type="radio"/>
62. Unable to recall some aspects of the event.	<input type="radio"/>	<input type="radio"/>
63. Felt detached or isolated from others.	<input type="radio"/>	<input type="radio"/>
64. At times felt like you had no feelings.	<input type="radio"/>	<input type="radio"/>
65. Less interest in doing things that you enjoyed.	<input type="radio"/>	<input type="radio"/>
66. Had difficulty falling asleep or staying awake.	<input type="radio"/>	<input type="radio"/>
67. Had outburst of anger.	<input type="radio"/>	<input type="radio"/>
68. Had difficulty concentrating or completing tasks.	<input type="radio"/>	<input type="radio"/>
69. Felt somewhat hopeless about the future.	<input type="radio"/>	<input type="radio"/>
70. Found yourself being hypervigilant (being very aware of your surroundings or very protective of family members or loved ones).	<input type="radio"/>	<input type="radio"/>
71. Startled more than usual to loud noises.	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Less Enjoyable	No Change	More Enjoyable
72. Has your job satisfaction changed since the last survey?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
73. Has your style of law enforcement changed since the last survey?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate the following questions:

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
74. Do you think it is useful for personnel to have a debriefing after an incident?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
75. Do you think it is useful for your family members to have a debriefing to help them understand and cope with what you have experienced?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

76. Since the last survey, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

78. Since the last survey, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="checkbox"/>	<input type="checkbox"/>
Counseling	<input type="checkbox"/>	<input type="checkbox"/>
Family Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Peer Support Group	<input type="checkbox"/>	<input type="checkbox"/>
Attended any seminar or training program	<input type="checkbox"/>	<input type="checkbox"/>

80. Since the last survey and as a result of the critical incident, have you

	Yes	No
Used sick leave?	<input type="checkbox"/>	<input type="checkbox"/>
Been to a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Wanted to call in sick, but didn't?	<input type="checkbox"/>	<input type="checkbox"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. Since the last survey, have you talked to any of the following about the incident?

Check all that apply:

Family member  
 Close friend  
 Minister, Chaplain, or Clergy  
 Have talked to no one



**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

- 0 0 0
- 1 1 1
- 2 2 2
- 3 3 3
- 4 4 4
- 5 5 5
- 6 6 6
- 7 7 7
- 8 8 8
- 9 9 9

**CLIENT CODE**

- 0 0 0
- 1 1 1
- 2 2 2
- 3 3 3
- 4 4 4
- 5 5 5
- 6 6 6
- 7 7 7
- 8 8 8
- 9 9 9

**FORM NUMBER**

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9

**TEAM NUMBER OF INDIVIDUAL**

- 0 0 0
- 1 1 1
- 2 2 2
- 3 3 3
- 4 4 4
- 5 5 5
- 6 6 6
- 7 7 7
- 8 8 8
- 9 9 9

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

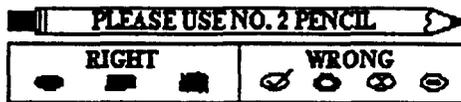
Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**CISD DEBRIEFING - THREE MONTHS**

This document is for use by L.E.A.F.S. Personnel ONLY

All information provided will be kept confidential and will be used only for research purposes. Failure to maintain strict confidentiality regarding C.I.S. debriefings, including topics discussed and personnel involved will result in the immediate removal from the L.E.A.F.S. team and the Program. To maintain confidential records for the intent of L.E.A.F.S. research, NO COPIES OF THIS DOCUMENT WILL BE ALLOWED OR TOLERATED.

The survey will take just a few minutes to complete. Please answer each question making sure to shade the corresponding circle area completely. Please use a #2 pencil.



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- \* Make heavy black marks that fill the bubble completely.
- \* Erase cleanly any you wish to change.
- \* Make no stray marks on this sheet.

**DO NOT COPY, FOLD, TEAR OR MUTILATE THIS FORM**

**1. GENDER**

- Male
- Female

**2. AGE**

- 0 0
- 1 1
- 2 2
- 3 3
- 4 4
- 5 5
- 6 6
- 7 7
- 8 8
- 9 9

**3. What is your highest level of education?**

- High School / GED
- Some College
- Associate Degree
- Bachelor's Degree
- Some Graduate Work
- Graduate Degree

**4. What is your race (ethnicity)?**

- African American
- American Indian/Alaskan Native
- Asian or Pacific Islander
- White, not of Hispanic Origin
- Hispanic

**5. Have you ever served full time on active duty in the U.S. Military?**

- Yes
- No

**6. What is your rank within the department?**

- CPL
- SGT
- LT
- Capt. or Higher
- Chief of Police
- Sheriff
- No Rank

**7. Primary duties at this time:**

- Patrol Officer
- Det / Inv
- Communications
- Jailer
- Narcotic Vice
- Administrative
- Court or Process Server
- Juvenile

**8. Number of years service in law enforcement?**

- 0 0
- 1 1
- 2 2
- 3 3
- 4 4
- 5 5
- 6 6
- 7 7
- 8 8
- 9 9

**9. Type of Agency:**

- City
- County
- State

**10. Marital Status:**

- Single, never married
- Currently married
- Separated
- Widowed, not remarried
- Divorced, not remarried
- Live together, not married

11. How many times have you been married?

- None
- One
- Two
- Three
- Four or more

12. Do any preschool children live with you?

- Yes  No

13. Do you or your spouse care for an elderly parent or relative?

- Yes  No

14. Have you participated in a Defusing prior to being Debriefed?

- Yes  No

Below is a list of comments made by people after stressful life events. Please check each item indicating how frequently these comments were true for you since the last survey with respect to the event. If they did not occur during that time, please mark "not at all" column.

	Not at all	Rarely	Sometimes	Often
15. Any reminder brought back feelings about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I had trouble staying asleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Other things kept making me think about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I felt irritable and angry.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I avoided letting myself get upset when I thought about it or was reminded of it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. I thought about it when I didn't mean to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I felt as if it hadn't happened or wasn't real.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I stayed away from reminders about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Pictures about it popped into my mind.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I was jumpy and easily startled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I tried not to think about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. I was aware that I still had a lot of feelings about it, but I didn't deal with them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. My feelings about it were kind of numb.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. I found myself acting or feeling like I was back at that time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. I had trouble falling asleep.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. I had waves of strong feelings about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. I tried to remove it from my memory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. I had trouble concentrating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Reminders of it caused me to have physical reactions such as sweating, trouble breathing, nausea or a pounding heart.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. I had dreams about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. I felt watchful and on-guard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. I tried not to talk about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Below are five statements, with which you may agree or disagree. Using the scale below, indicate your agreement with each item.

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree Nor Disagree	Slightly Agree	Agree	Strongly Agree
37. In most ways my life is close to my ideal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. The conditions of my life are excellent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. I am satisfied with my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. So far, I have gotten the important things I want in life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. If I could live my life over, I would change almost nothing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



76. Since the last survey, have you used any services. Such as the Employee Assistance Program or counseling in relation to the incident you experience?

Yes  No

77. If so, what service have you used? (If no service was used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>
Counseling	<input type="radio"/>	<input type="radio"/>
Family Support Group	<input type="radio"/>	<input type="radio"/>
Peer Support Group	<input type="radio"/>	<input type="radio"/>
Attended any seminar or training program	<input type="radio"/>	<input type="radio"/>

78. Since the last survey, have any of your family members used any services. Such as Employee Assistance Program or counseling in relation to the incident you experienced?

Yes  No

79. What service have they used? (If no services were used answer each item as "no").

	Yes	No
Employee Assistance Program (EAP)	<input type="radio"/>	<input type="radio"/>
Counseling	<input type="radio"/>	<input type="radio"/>
Family Support Group	<input type="radio"/>	<input type="radio"/>
Peer Support Group	<input type="radio"/>	<input type="radio"/>
Attended any seminar or training program	<input type="radio"/>	<input type="radio"/>

80. Since the last survey and as a result of the critical incident, have you

	Yes	No
Used sick leave?	<input type="radio"/>	<input type="radio"/>
Been to a doctor?	<input type="radio"/>	<input type="radio"/>
Wanted to call in sick, but didn't?	<input type="radio"/>	<input type="radio"/>

81. Indicate if you have had any of these health related problems since the critical incident.

<input type="checkbox"/> Stomach / Digestive	<input type="checkbox"/> Chest Pains
<input type="checkbox"/> Loss of Appetite	<input type="checkbox"/> Heart Trouble
<input type="checkbox"/> Backache	<input type="checkbox"/> Sleeplessness
<input type="checkbox"/> Headaches	<input type="checkbox"/> Asthma
<input type="checkbox"/> Dizziness	<input type="checkbox"/> Diabetes
<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Other

82. Since the last survey, have you talked to any of the following about the incident?

Check all that apply:

Family member  
 Close friend  
 Minister, Chaplain, or Clergy  
 Have talked to no one



**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**Instructions for Distribution of Questionnaires and  
Peer, Family Support Groups**

**I. Instructions for Distribution of Questionnaires**

It is very important that we all be consistent and accurate in the distribution of questionnaires and the collection of information. The following are offered as guidelines to assist you in this task. If you have any question, concerns or comments about the questionnaires, please contact the Tennessee Law Enforcement and Family Support Program at (615) 884-1259.

**A. Research Goals:**

An important goal of this grant has been the development of C.I.S.D. Teams, Peer Support and Family Support Teams for the State of Tennessee. In addition, an equally important goal of this project is to evaluate the effectiveness of these programs so they may be replicated in other jurisdictions.

The questionnaires that you will distribute are vital in the evaluation of the program. As you are aware the State of Tennessee has been organized into three regions. Officers in each region who are exposed to a critical incident will have access to different services.

**West**  
C.I.S.D.

**Middle**  
C.I.S.D.  
Peer Support  
Family Support

**East**  
C.I.S.D.  
Peer Support

The questionnaires will allow us to evaluate what combination of services will offer the most benefits to officers and their family members.

**B. Informed Consent:**

All participants are required to read and sign the Informed Consent Statement (Please see attached) prior to completing the first questionnaire. For each participant two forms will be provided. One is to be signed and collected. The second copy of the consent form can be kept by the officer.

Be sure to stress to purpose of the project and that all information will be kept confidential. We are required by Federal regulations to follow strict guidelines to secure participants' confidentiality.

**C. Distribution of Questionnaires:**

1. The questionnaire will be distributed 3 times.
  - 1<sup>st</sup> - before the debriefing takes place
  - 2<sup>nd</sup> - 2 weeks after the debriefing
  - 3<sup>rd</sup> - 3 months after the debriefing

Team leaders will be responsible for the distribution, collection and return of completed questionnaires to the Program Manager, Ms. Betty Pritchett. Giving the scale three times will allow us to identify what changes take place over time based on the assistance the officers receive.

2. a. The **Informed Consent Form** and the 1st questionnaire will be given to officers at the debriefing, before the actual debriefing begins. This questionnaire is labeled **FORM-1 ( Debriefing)**. FORM-1 consists of general information about the participant, and items that will measure how the critical incident has impacted the officer.

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b. Also a member of the debriefing team will need to complete the **Identification of the Critical Incident** on FORM-1. This can be found on page 6 of FORM-1.

3. a. When the questionnaires are completed at the 2 week and 3 month periods, **FORM-2 (2 weeks & 3 months)** and **FORM-2-A (2 weeks & 3 months)** will be used.  
b. FORM-2 contains similar information as FORM-1.  
c. FORM-2-A asks the officers to evaluate the C.I.S.D. Team, Peer Support Team and the Family Support Team.
4. Based on the region in which the critical incident occurred, different sections of FORM-2-A will be completed as follows:

<b>West</b>	<b>Middle</b>	<b>East</b>
SECTION A: CISD TEAM	SECTION A: CISD TEAM SECTION B: PEER SUPPORT SECTION C: FAMILY SUPPORT	SECTION A: CISD TEAM SECTION B: PEER SUPPORT

It may be easiest to just cross out the sections that do not apply to your region, before giving the questionnaire to the officer.

5. Each time questionnaires are completed, please use the mailing labels supplied and return all questionnaires to the Program Manager, Ms. Betty Prichard.

## **II. Instructions for Peer Support and Family Support Teams**

1. In addition to providing C.I.S.D., officers in Middle Tennessee will also be provided with Peer Support and Family Support. Officers in East Tennessee will be provided with Peer Support.
2. To allow for comparisons to be made between the different services, it is vital that officers in Middle and East Tennessee be provided those services prior to the 2<sup>nd</sup> distribution of the questionnaire. To accomplish this, members of the Peer and Family Support Teams need to contact the officer 1 week after the debriefing. This will ensure that the officer will have had some contact with the service prior to the 2<sup>nd</sup> distribution of the questionnaire.
3. When a member of the Peer and Family Support Teams contacts the officer, they need to ask the officer how they are doing, make the officer aware of the services that can be provided by the Support group, and ask the officer if any assistance can be provided at that time.
4. A log should be kept as to when officers are contacted.

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**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX0005

**Informed Consent Statement**

The purpose of this research project is to develop quality programs that can assist officers to better deal with critical incidents that may occur on the job and to minimize the impact that such incidents can have on the officer and their family members.

As part of this project you will be asked to complete several brief questionnaires now and again in 2 weeks and 3 months. It will take approximately 15 minutes to complete the questionnaires. The information you provide will assist in developing and identifying the effectiveness of programs specifically designed for officers and their family members.

All information you provide will be kept strictly confidential and will only be used for research purposes by the Tennessee Law Enforcement and Family Support Project. We are required by Federal regulations to follow strict guidelines to secure participants confidentiality. Information provided will **not** be released to other personnel in your department or other agencies. The goal of this project is to identify overall trends and not specific officers or agencies.

Your participation in this project, while strongly encouraged is completely voluntary. You may withdraw from participation at any time. If you have any questions or concerns about the questionnaires, the project or services, contact the Tennessee Law Enforcement and Family Support Program at (615) 884-1259.

Name (Please Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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# First and last data records for Teams CISD, Family, Peer

The variables are listed in the following order:

LINE 1: REGION DEPT CLIENT FORM TEAM CONTACT EVAL  
LINE 2: EFFECT KNOW USEFUL MEAN1 AWAREST SKILLJOB SKILLFAM  
LINE 3: DELTST DELTFAM DELTJOB KNOWSER KNOWFAM WILLUSE TRAIN  
LINE 4: IMPACT MEAN2 FILTER\_\$ VAR00001

## FIRST CASE

REGION:	1.00	3.00	2.00	4.00	114.00		5.00
EFFECT:	5.00	5.00	5.00	5.00	4.00	4.00	4.00
DELTST:	4.00	4.00	4.00	5.00	5.00	5.00	5.00
IMPACT:	5.00	4.45 1	1.00				

## LAST CASE

REGION:	2.00	103.00	2.00	6.00	221.00 Y		5.00
EFFECT:	5.00	5.00	5.00	5.00	5.00	5.00	4.00
DELTST:	4.00	4.00	4.00	5.00	2.00	4.00	4.00
IMPACT:	5.00	4.18 1	81.00				

Number of cases read: 2      Number of cases listed: 2

# DATA DICTIONARY FOR TEAMS CISD, FAMILY, PEER

File Type: SPSS Data File

Creation Date: 27 Jul 99

Creation Time: 07:06:07

Label: Not Available

N of Cases: 81

Total # of Defined Variable Elements: 24

# of Named Variables: 24

Data Are Not Weighted

Data Are Compressed

File Has Same Byte Order as Host

File Contains Case Data

File Contains No Variable Sets

File Contains No Trends Date Information

File Contains No Multiple Response Definitions

File Contains No Data Entry for Windows Information

File Contains No TextSmart Information

File Is Compatible with SPSS Releases Prior to 7.5

Variable Information:

Name		Position
REGION	REGION Measurement level: Ordinal Format: F8.2 Column Width: Unknown Alignment: Right  Value    Label  1.00    east 2.00    middle 3.00    west	1
DEPT	department Measurement level: Ordinal Format: F8.2 Column Width: Unknown Alignment: Right	2
CLIENT	Client Id number Measurement level: Ordinal Format: F8.2 Column Width: Unknown Alignment: Right	3
FORM	evaluation form Measurement level: Ordinal Format: F8.2 Column Width: Unknown Alignment: Right  Value    Label  4.00    cid team 5.00    peer team 6.00    family team	4
TEAM	team id number Measurement level: Ordinal Format: F8.2 Column Width: Unknown Alignment: Right	5
CONTACT	contacted by team member Measurement level: Nominal Format: A8 Column Width: 8 Alignment: Right Missing Values: '', '*'  Value    Label  M    missing *        M    invali response N            no Y            yes	6

EVAL overall eval of team 7  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	very poor
2.00	poor
3.00	average
4.00	good
5.00	excellent

EFFECT effectiveness of team 8  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	very poor
2.00	poor
3.00	average
4.00	good
5.00	excellent

KNOW knowledge of subject/referral 9  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	very poor
2.00	poor
3.00	average
4.00	good
5.00	excellent

USEFUL availabel/clear 10  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not at all
2.00	slightly
3.00	moderately
4.00	quite a bit
5.00	a great deal

MEAN1 mean score effectivess of team 11  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

AWAREST	improved awareness of stress issues Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	12												
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not at all</td> </tr> <tr> <td>2.00</td> <td>slightly</td> </tr> <tr> <td>3.00</td> <td>moderately</td> </tr> <tr> <td>4.00</td> <td>quite a bit</td> </tr> <tr> <td>5.00</td> <td>a great deal</td> </tr> </tbody> </table>	Value	Label	1.00	not at all	2.00	slightly	3.00	moderately	4.00	quite a bit	5.00	a great deal	
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1.00	not at all													
2.00	slightly													
3.00	moderately													
4.00	quite a bit													
5.00	a great deal													
SKILLJOB	ident skill deal with job stress Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	13												
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not at all</td> </tr> <tr> <td>2.00</td> <td>slightly</td> </tr> <tr> <td>3.00</td> <td>moderately</td> </tr> <tr> <td>4.00</td> <td>quite a bit</td> </tr> <tr> <td>5.00</td> <td>a great deal</td> </tr> </tbody> </table>	Value	Label	1.00	not at all	2.00	slightly	3.00	moderately	4.00	quite a bit	5.00	a great deal	
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1.00	not at all													
2.00	slightly													
3.00	moderately													
4.00	quite a bit													
5.00	a great deal													
SKILLFAM	ident skills deal with family stress Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	14												
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not at all</td> </tr> <tr> <td>2.00</td> <td>slightly</td> </tr> <tr> <td>3.00</td> <td>moderately</td> </tr> <tr> <td>4.00</td> <td>quite a bit</td> </tr> <tr> <td>5.00</td> <td>a great deal</td> </tr> </tbody> </table>	Value	Label	1.00	not at all	2.00	slightly	3.00	moderately	4.00	quite a bit	5.00	a great deal	
Value	Label													
1.00	not at all													
2.00	slightly													
3.00	moderately													
4.00	quite a bit													
5.00	a great deal													
DELTST	impact how deal with stress Measurement level: Ordinal Format: F8.2 Column Width: 8 Alignment: Left	15												
	<table border="0"> <thead> <tr> <th style="text-align: left;">Value</th> <th style="text-align: left;">Label</th> </tr> </thead> <tbody> <tr> <td>1.00</td> <td>not at all</td> </tr> <tr> <td>2.00</td> <td>slightly</td> </tr> <tr> <td>3.00</td> <td>moderately</td> </tr> <tr> <td>4.00</td> <td>quite a bit</td> </tr> <tr> <td>5.00</td> <td>a great deal</td> </tr> </tbody> </table>	Value	Label	1.00	not at all	2.00	slightly	3.00	moderately	4.00	quite a bit	5.00	a great deal	
Value	Label													
1.00	not at all													
2.00	slightly													
3.00	moderately													
4.00	quite a bit													
5.00	a great deal													



WILLUSE more willing to use services 20  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not at all
2.00	slightly
3.00	moderately
4.00	quite a bit
5.00	a great deal

TRAIN want additional training 21  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not at all
2.00	slightly
3.00	moderately
4.00	quite a bit
5.00	a great deal

IMPACT impact work and family relations 22  
Measurement level: Ordinal  
Format: F8.2 Column Width: 8 Alignment: Left

Value	Label
1.00	not at all
2.00	slightly
3.00	moderately
4.00	quite a bit
5.00	a great deal

MEAN2 mean score of what gained from team 23  
Measurement level: Scale  
Format: F8.2 Column Width: Unknown Alignment: Right

FILTER\_\$ contact ~= 'N' (FILTER) 24  
Measurement level: Scale  
Format: F1 Column Width: Unknown Alignment: Right

Value	Label
0	Not Selected
1	Selected



**PEER SUPPORT EVALUATION**

Have you been contacted by a member of the Peer Support Team?

- Yes    No

If you answer No, do not complete the rest of this section.

Please use the following scales to evaluate the effectiveness of the Peer Support Team.

Excellent				
Good				
Average				
Poor				
Very Poor				

- 1. Overall evaluation of the Peer Support.
- 2. Effectiveness of the Peer Support Team.
- 3. Knowledge of referral resource for services.
- 4. Available to provide assistance when contacted.

Please answer the following questions to evaluate what you have gained from Peer Support.

A great deal				
Quite a bit				
Moderately				
Slightly				
Not at all				

- 5. Improved your awareness of stress issues.
- 6. Identified coping skills to deal with job related stress.
- 7. Identified coping skills to deal with family related stress.
- 8. Impacted how you personally dealt with stress?
- 9. Impacted how you dealt with family stress issues?
- 10. Impacted how you dealt with job related stress issues?
- 11. Increased knowledge of support services for you?
- 12. Increased knowledge of support services for your family?
- 13. Are you more willing to use available support services if needed?
- 14. Would you be interested in additional training on this topic?
- 15. Overall how did Peer Support impact your work and family relations?

**DO NOT MARK IN THIS BLOCK. FOR TSA OFFICE USE ONLY.**

**AGENCY CODE NUMBER**

- East
- Middle
- West

**CLIENT CODE**

**FORM NUMBER**

**TEAM NUMBER OF INDIVIDUAL**

0 0 0	0 0 0	0 0	0 0 0
1 1 1	1 1 1	1 1	1 1 1
2 2 2	2 2 2	2 2	2 2 2
3 3 3	3 3 3	3 3	3 3 3
4 4 4	4 4 4	4 4	4 4 4
5 5 5	5 5 5	5 5	5 5 5
6 6 6	6 6 6	6 6	6 6 6
7 7 7	7 7 7	7 7	7 7 7
8 8 8	8 8 8	8 8	8 8 8
9 9 9	9 9 9	9 9	9 9 9



Tabel #

Summary of Evaluations of CISD Training

Item	Trainer 1			Trainer 2		
	Mean Score	Standard Deviation	n <sup>a</sup>	Mean Score	Standard Deviation	n <sup>a</sup>
<u>CISD Training April 17-19, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	3.96	0.29	48	2.50	0.50	47
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	4.00	0.00	48	3.50	0.50	47
3. How well did the subject matter fulfil the stated objective of the program?	4.00	0.00	48	4.00	0.00	46
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.98	0.14	48	4.00	0.00	45
Visual Aids	4.00	0.00	48	4.00	0.00	46
Handouts	4.00	0.00	48	4.00	0.00	47
5. What is your overall evaluation of the training?	4.00	0.00	48	4.00	0.00	46
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	48	4.00	0.00	47
7. Did the instructor have an effective style of presentation?	4.00	0.00	48	4.00	0.00	47
8. Did the instructor support the values and viewpoints of others?	4.00	0.00	48	4.00	0.00	47
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	4.00	0.00	48	4.00	0.00	46
10. Was the instructor helpful when students encountered difficulties?	4.00	0.00	48	4.00	0.00	46
11. Did the instructor establish and maintain good relations with the class?	4.00	0.00	48	4.00	0.00	47
12. Was the instructor clear and thoughtful when answering questions?	4.00	0.00	48	4.00	0.00	47
13. Did the instructor help you to develop an understanding of the subject matter?	4.00	0.00	48	4.00	0.00	47
14. Did the instructor consistently begin and terminate classes on time?	4.00	0.00		3.50	0.50	47
15. Would you recommend this course to a friend?	4.00	0.00	48	4.00	0.00	47
<u>CISD Training May 1-3, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	2.73	0.65	66	3.48	0.63	67
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.71	0.45	66	3.76	0.46	67
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	66	3.75	0.50	67
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.88	0.32	64	3.43	0.75	67
Visual Aids	3.75	0.50	60	3.61	0.55	66
Handouts	3.63	0.66	54	3.73	0.47	65
5. What is your overall evaluation of the training?	3.94	0.24	63	3.80	0.44	64
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	66	3.91	0.29	67
7. Did the instructor have an effective style of presentation?	3.97	0.17	66	3.80	0.41	67
8. Did the instructor support the values and viewpoints of others?	3.86	0.35	66	3.77	0.47	67
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.86	0.42	66	3.78	0.45	67
10. Was the instructor helpful when students encountered difficulties?	3.89	0.32	66	3.80	0.44	64
11. Did the instructor establish and maintain good relations with the class?	3.94	0.23	66	3.81	0.40	64
12. Was the instructor clear and thoughtful when answering questions?	3.97	0.17	66	3.85	0.36	67
13. Did the instructor help you to develop an understanding of the subject matter?	3.97	0.17	66	3.81	0.46	67
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.42	66	3.66	0.51	67
15. Would you recommend this course to a friend?	3.97	0.17	66	3.79	0.47	67

<sup>a</sup> The number of individuals that responded to that item Note: For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent

Tabel #

Summary of Evaluations of Peer Support Training

Item	Session												
	1. Overview of CISD Trainer 1			Trainer2			2. Domestic Violence			3. Death Notification			
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	
1. How was the physical facility (seating, room size, work space, etc.)?	3.76	0.43	37				3.71	1.21	35		3.73	0.51	37
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.88	0.33	37				3.63	0.26	35		3.84	0.37	37
3. How well did the subject matter fulfil the stated objective of the program?	3.92	0.27	37				3.47	0.37	34		3.92	0.28	37
4. Indicate how well each of the following contributed to the training:													
Group Participation	3.92	0.27	37				3.53	0.37	34		3.76	0.44	37
Visual Aids	3.58	0.64	35				3.29	0.21	34		3.68	0.55	28
Handouts	3.63	0.48	36				3.27	0.19	33		3.86	0.35	37
5. What is your overall evaluation of the training?	3.88	0.33	37				3.33	0.47	34		3.94	0.34	35
6. Did the instructor display a clear understanding of the content of the course?	3.92	0.28	35	3.80	0.40	27	3.47	0.33	36		4.00	0.00	38
7. Did the instructor have an effective style of presentation?	4.00	0.00	35	3.80	0.40	27	2.78	0.16	36		3.97	0.28	38
8. Did the instructor support the values and viewpoints of others?	3.88	0.33	35	3.80	0.40	27	3.00	0.71	36		3.89	0.31	37
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.88	0.33	35	3.80	0.40	27	3.31	0.22	36		3.87	0.34	38
10. Was the instructor helpful when students encountered difficulties?	3.96	0.20	35	3.80	0.40	27	3.21	0.15	35		3.87	0.34	38
11. Did the instructor establish and maintain good relations with the class?	4.00	0.29	35	3.80	0.40	27	3.19	0.14	36		3.97	0.28	38
12. Was the instructor clear and thoughtful when answering questions?	3.96	0.20	35	3.90	0.30	27	3.36	0.45	36		3.97	0.16	38
13. Did the instructor help you to develop an understanding of the subject matter?	3.92	0.28	35	3.80	0.40	27	3.28	0.20	36		3.95	0.23	38
14. Did the instructor consistently begin and terminate classes on time?	3.83	0.37	35	3.70	0.40	27	3.42	0.29	36		3.84	0.37	38
15. Would you recommend this course to a friend?	3.96	0.20	35	3.95	0.22	27	3.37	0.26	36		3.95	0.23	38

<sup>a</sup> The number of individuals that responded to item. Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session											
	4. Family Systems			5. Chemical Dependency			6. Trainer 1 Child & Family Dealing with Trauma			Trainer 2. Relaxation Response		
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>
1. How was the physical facility (seating, room size, work space, etc.)?	3.74	0.50	34	3.67	0.53	36	3.94	0.52	36			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.79	0.40	34	3.81	0.40	36	3.64	0.59	36			
3. How well did the subject matter fulfil the stated objective of the program?	3.71	0.52	34	3.94	0.33	36	3.33	0.93	36			
4. Indicate how well each of the following contributed to the training:												
Group Participation	3.82	0.39	33	3.81	0.47	36	3.78	0.48	36			
Visual Aids	3.70	0.52	33	3.77	0.43	35	3.50	0.61	36			
Handouts	3.72	0.51	33	3.86	0.36	35	3.57	0.56	35			
5. What is your overall evaluation of the training?	3.69	0.53	32	4.00	0.00	36	3.44	0.65	36			
6. Did the instructor display a clear understanding of the content of the course?	3.80	0.57	35	3.97	0.16	37	3.23	0.88	35	3.80	0.50	36
7. Did the instructor have an effective style of presentation?	3.71	0.51	35	3.89	0.31	37	3.09	0.85	35	3.60	0.60	36
8. Did the instructor support the values and viewpoints of others?	3.65	0.48	34	3.86	0.42	37	2.80	0.99	35	3.50	0.70	36
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.60	0.60	35	3.81	0.40	37	3.16	0.10	35	3.60	0.60	36
10. Was the instructor helpful when students encountered difficulties?	3.71	0.51	35	3.84	0.37	37	2.91	0.92	35	3.60	0.70	36
11. Did the instructor establish and maintain good relations with the class?	3.77	0.48	35	3.92	0.28	37	2.77	1.11	35	3.60	0.60	36
12. Was the instructor clear and thoughtful when answering questions?	3.77	0.42	35	3.89	0.31	37	3.00	0.98	35	3.60	0.60	36
13. Did the instructor help you to develop an understanding of the subject matter?	3.74	0.50	35	3.89	0.31	37	2.89	1.02	35	3.40	0.70	36
14. Did the instructor consistently begin and terminate classes on time?	3.66	0.58	35	3.84	0.37	37	3.14	0.85	35	3.50	0.60	36
15. Would you recommend this course to a friend?	3.74	0.50	35	3.95	0.23	37	2.94	1.01	35	3.53	0.65	36

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session														
	7. Psychiatric Conditions			8. Ethics & Public Integrity			9. Research & Evaluation			10. L.E.A.F.S. Policy & Procedure					
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	Trainer1			Trainer2		
									M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	
1. How was the physical facility (seating, room size, work space, etc.)?	3.75	0.50	36	3.68	0.54	31	3.69	0.85	35	3.70	0.53	33			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.94	0.23	36	3.77	0.50	31	3.80	0.53	35	3.91	0.29	33			
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	36	3.61	0.72	31	3.89	0.07	35	3.97	0.17	33			
4. Indicate how well each of the following contributed to the training:															
Group Participation	3.76	0.34	33	3.55	0.69	29	3.86	0.08	35	3.97	0.17	33			
Visual Aids	3.38	0.94	27	3.70	0.47	30	3.79	0.53	33	3.88	0.33	26			
Handouts	3.59	0.61	33	3.77	0.43	30	3.81	0.14	31	3.94	0.25	31			
5. What is your overall evaluation of the training?	3.81	0.40	36	3.70	0.54	30	3.85	0.08	34	4.00	0.00	32			
6. Did the instructor display a clear understanding of the content of the course?	3.94	0.23	36	3.80	0.41	30	3.86	0.08	36	4.00	0.00	33	4.00	0.00	33
7. Did the instructor have an effective style of presentation?	3.83	0.38	36	3.68	0.54	32	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
8. Did the instructor support the values and viewpoints of others?	3.72	0.45	36	3.47	0.73	30	3.74	0.52	35	3.97	0.17	33	4.00	0.00	31
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.61	0.64	36	3.58	0.67	31	3.80	0.53	35	3.97	0.18	32	4.00	0.00	31
10. Was the instructor helpful when students encountered difficulties?	3.80	0.47	36	3.63	0.61	30	3.77	0.52	36	4.00	0.00	33	4.00	0.00	31
11. Did the instructor establish and maintain good relations with the class?	3.89	0.32	36	3.42	0.89	31	3.78	0.53	36	4.00	0.00	33	4.00	0.00	31
12. Was the instructor clear and thoughtful when answering questions?	3.58	0.35	36	3.71	0.53	31	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
13. Did the instructor help you to develop an understanding of the subject matter?	3.86	0.35	36	3.57	0.63	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.35	36	3.77	0.50	30	3.78	0.53	36	3.94	0.24	33	4.00	0.00	31
15. Would you recommend this course to a friend?	3.92	0.28	36	3.58	0.62	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of CISD Training

Item	Trainer 1			Trainer 2		
	Mean Score	Standard Deviation	n <sup>a</sup>	Mean Score	Standard Deviation	n <sup>a</sup>
<u>CISD Training April 17-19, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	3.96	0.29	48	2.50	0.50	47
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	4.00	0.00	48	3.50	0.50	47
3. How well did the subject matter fulfil the stated objective of the program?	4.00	0.00	48	4.00	0.00	46
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.98	0.14	48	4.00	0.00	45
Visual Aids	4.00	0.00	48	4.00	0.00	46
Handouts	4.00	0.00	48	4.00	0.00	47
5. What is your overall evaluation of the training?	4.00	0.00	48	4.00	0.00	46
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	48	4.00	0.00	47
7. Did the instructor have an effective style of presentation?	4.00	0.00	48	4.00	0.00	47
8. Did the instructor support the values and viewpoints of others?	4.00	0.00	48	4.00	0.00	47
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	4.00	0.00	48	4.00	0.00	46
10. Was the instructor helpful when students encountered difficulties?	4.00	0.00	48	4.00	0.00	46
11. Did the instructor establish and maintain good relations with the class?	4.00	0.00	48	4.00	0.00	47
12. Was the instructor clear and thoughtful when answering questions?	4.00	0.00	48	4.00	0.00	47
13. Did the instructor help you to develop an understanding of the subject matter?	4.00	0.00	48	4.00	0.00	47
14. Did the instructor consistently begin and terminate classes on time?	4.00	0.00	48	3.50	0.50	47
15. Would you recommend this course to a friend?	4.00	0.00	48	4.00	0.00	47
<u>CISD Training May 1-3, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	2.73	0.65	66	3.48	0.63	67
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.71	0.45	66	3.76	0.46	67
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	66	3.75	0.50	67
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.88	0.32	64	3.43	0.75	67
Visual Aids	3.75	0.50	60	3.61	0.55	66
Handouts	3.63	0.66	54	3.73	0.47	65
5. What is your overall evaluation of the training?	3.94	0.24	63	3.80	0.44	64
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	66	3.91	0.29	67
7. Did the instructor have an effective style of presentation?	3.97	0.17	66	3.80	0.41	67
8. Did the instructor support the values and viewpoints of others?	3.86	0.35	66	3.77	0.47	67
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.86	0.42	66	3.78	0.45	67
10. Was the instructor helpful when students encountered difficulties?	3.89	0.32	66	3.80	0.44	64
11. Did the instructor establish and maintain good relations with the class?	3.94	0.23	66	3.81	0.40	64
12. Was the instructor clear and thoughtful when answering questions?	3.97	0.17	66	3.85	0.36	67
13. Did the instructor help you to develop an understanding of the subject matter?	3.97	0.17	66	3.81	0.46	67
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.42	66	3.66	0.51	67
15. Would you recommend this course to a friend?	3.97	0.17	66	3.79	0.47	67

<sup>a</sup> The number of individuals that responded to that item Note: For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent

Tabel #

Summary of Evaluations of Peer Support Training

Item	Session												
	1. Overview of CISD Trainer 1			Trainer2			2. Domestic Violence			3. Death Notification			
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	
1. How was the physical facility (seating, room size, work space, etc.)?	3.76	0.43	37				3.71	1.21	35		3.73	0.51	37
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.88	0.33	37				3.63	0.26	35		3.84	0.37	37
3. How well did the subject matter fulfil the stated objective of the program?	3.92	0.27	37				3.47	0.37	34		3.92	0.28	37
4. Indicate how well each of the following contributed to the training:													
Group Participation	3.92	0.27	37				3.53	0.37	34		3.76	0.44	37
Visual Aids	3.58	0.64	35				3.29	0.21	34		3.68	0.55	28
Handouts	3.63	0.48	36				3.27	0.19	33		3.86	0.35	37
5. What is your overall evaluation of the training?	3.88	0.33	37				3.33	0.47	34		3.94	0.34	35
6. Did the instructor display a clear understanding of the content of the course?	3.92	0.28	35	3.80	0.40	27	3.47	0.33	36		4.00	0.00	38
7. Did the instructor have an effective style of presentation?	4.00	0.00	35	3.80	0.40	27	2.78	0.16	36		3.97	0.28	38
8. Did the instructor support the values and viewpoints of others?	3.88	0.33	35	3.80	0.40	27	3.00	0.71	36		3.89	0.31	37
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.88	0.33	35	3.80	0.40	27	3.31	0.22	36		3.87	0.34	38
10. Was the instructor helpful when students encountered difficulties?	3.96	0.20	35	3.80	0.40	27	3.21	0.15	35		3.87	0.34	38
11. Did the instructor establish and maintain good relations with the class?	4.00	0.29	35	3.80	0.40	27	3.19	0.14	36		3.97	0.28	38
12. Was the instructor clear and thoughtful when answering questions?	3.96	0.20	35	3.90	0.30	27	3.36	0.45	36		3.97	0.16	38
13. Did the instructor help you to develop an understanding of the subject matter?	3.92	0.28	35	3.80	0.40	27	3.28	0.20	36		3.95	0.23	38
14. Did the instructor consistently begin and terminate classes on time?	3.83	0.37	35	3.70	0.40	27	3.42	0.29	36		3.84	0.37	38
15. Would you recommend this course to a friend?	3.96	0.20	35	3.95	0.22	27	3.37	0.26	36		3.95	0.23	38

<sup>a</sup> The number of individuals that responded to item. Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session											
	4. Family Systems			5. Chemical Dependency			6. Trainer 1 Child & Family Dealing with Trauma			Trainer 2. Relaxation Response		
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>
1. How was the physical facility (seating, room size, work space, etc.)?	3.74	0.50	34	3.67	0.53	36	3.94	0.52	36			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.79	0.40	34	3.81	0.40	36	3.64	0.59	36			
3. How well did the subject matter fulfil the stated objective of the program?	3.71	0.52	34	3.94	0.33	36	3.33	0.93	36			
4. Indicate how well each of the following contributed to the training:												
Group Participation	3.82	0.39	33	3.81	0.47	36	3.78	0.48	36			
Visual Aids	3.70	0.52	33	3.77	0.43	35	3.50	0.61	36			
Handouts	3.72	0.51	33	3.86	0.36	35	3.57	0.56	35			
5. What is your overall evaluation of the training?	3.69	0.53	32	4.00	0.00	36	3.44	0.65	36			
6. Did the instructor display a clear understanding of the content of the course?	3.80	0.57	35	3.97	0.16	37	3.23	0.88	35	3.80	0.50	36
7. Did the instructor have an effective style of presentation?	3.71	0.51	35	3.89	0.31	37	3.09	0.85	35	3.60	0.60	36
8. Did the instructor support the values and viewpoints of others?	3.65	0.48	34	3.86	0.42	37	2.80	0.99	35	3.50	0.70	36
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.60	0.60	35	3.81	0.40	37	3.16	0.10	35	3.60	0.60	36
10. Was the instructor helpful when students encountered difficulties?	3.71	0.51	35	3.84	0.37	37	2.91	0.92	35	3.60	0.70	36
11. Did the instructor establish and maintain good relations with the class?	3.77	0.48	35	3.92	0.28	37	2.77	1.11	35	3.60	0.60	36
12. Was the instructor clear and thoughtful when answering questions?	3.77	0.42	35	3.89	0.31	37	3.00	0.98	35	3.60	0.60	36
13. Did the instructor help you to develop an understanding of the subject matter?	3.74	0.50	35	3.89	0.31	37	2.89	1.02	35	3.40	0.70	36
14. Did the instructor consistently begin and terminate classes on time?	3.66	0.58	35	3.84	0.37	37	3.14	0.85	35	3.50	0.60	36
15. Would you recommend this course to a friend?	3.74	0.50	35	3.95	0.23	37	2.94	1.01	35	3.53	0.65	36

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session														
	7. Psychiatric Conditions			8. Ethics & Public Integrity			9. Research & Evaluation			10. L.E.A.F.S. Policy & Procedure					
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	Trainer1 M	SD	n <sup>a</sup>	Trainer2 M	SD	n <sup>a</sup>
1. How was the physical facility (seating, room size, work space, etc.)?	3.75	0.50	36	3.68	0.54	31	3.69	0.85	35	3.70	0.53	33			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.94	0.23	36	3.77	0.50	31	3.80	0.53	35	3.91	0.29	33			
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	36	3.61	0.72	31	3.89	0.07	35	3.97	0.17	33			
4. Indicate how well each of the following contributed to the training:															
Group Participation	3.76	0.34	33	3.55	0.69	29	3.86	0.08	35	3.97	0.17	33			
Visual Aids	3.38	0.94	27	3.70	0.47	30	3.79	0.53	33	3.88	0.33	26			
Handouts	3.59	0.61	33	3.77	0.43	30	3.81	0.14	31	3.94	0.25	31			
5. What is your overall evaluation of the training?	3.81	0.40	36	3.70	0.54	30	3.85	0.08	34	4.00	0.00	32			
6. Did the instructor display a clear understanding of the content of the course?	3.94	0.23	36	3.80	0.41	30	3.86	0.08	36	4.00	0.00	33	4.00	0.00	33
7. Did the instructor have an effective style of presentation?	3.83	0.38	36	3.68	0.54	32	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
8. Did the instructor support the values and viewpoints of others?	3.72	0.45	36	3.47	0.73	30	3.74	0.52	35	3.97	0.17	33	4.00	0.00	31
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.61	0.64	36	3.58	0.67	31	3.80	0.53	35	3.97	0.18	32	4.00	0.00	31
10. Was the instructor helpful when students encountered difficulties?	3.80	0.47	36	3.63	0.61	30	3.77	0.52	36	4.00	0.00	33	4.00	0.00	31
11. Did the instructor establish and maintain good relations with the class?	3.89	0.32	36	3.42	0.89	31	3.78	0.53	36	4.00	0.00	33	4.00	0.00	31
12. Was the instructor clear and thoughtful when answering questions?	3.58	0.35	36	3.71	0.53	31	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
13. Did the instructor help you to develop an understanding of the subject matter?	3.86	0.35	36	3.57	0.63	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.35	36	3.77	0.50	30	3.78	0.53	36	3.94	0.24	33	4.00	0.00	31
15. Would you recommend this course to a friend?	3.92	0.28	36	3.58	0.62	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of CISD Training

Item	Trainer 1			Trainer 2		
	Mean Score	Standard Deviation	n <sup>a</sup>	Mean Score	Standard Deviation	n <sup>a</sup>
<u>CISD Training April 17-19, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	3.96	0.29	48	2.50	0.50	47
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	4.00	0.00	48	3.50	0.50	47
3. How well did the subject matter fulfil the stated objective of the program?	4.00	0.00	48	4.00	0.00	46
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.98	0.14	48	4.00	0.00	45
Visual Aids	4.00	0.00	48	4.00	0.00	46
Handouts	4.00	0.00	48	4.00	0.00	47
5. What is your overall evaluation of the training?	4.00	0.00	48	4.00	0.00	46
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	48	4.00	0.00	47
7. Did the instructor have an effective style of presentation?	4.00	0.00	48	4.00	0.00	47
8. Did the instructor support the values and viewpoints of others?	4.00	0.00	48	4.00	0.00	47
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	4.00	0.00	48	4.00	0.00	46
10. Was the instructor helpful when students encountered difficulties?	4.00	0.00	48	4.00	0.00	46
11. Did the instructor establish and maintain good relations with the class?	4.00	0.00	48	4.00	0.00	47
12. Was the instructor clear and thoughtful when answering questions?	4.00	0.00	48	4.00	0.00	47
13. Did the instructor help you to develop an understanding of the subject matter?	4.00	0.00	48	4.00	0.00	47
14. Did the instructor consistently begin and terminate classes on time?	4.00	0.00	48	3.50	0.50	47
15. Would you recommend this course to a friend?	4.00	0.00	48	4.00	0.00	47
<u>CISD Training May 1-3, 1999</u>						
1. How was the physical facility (seating, room size, work space, etc.)?	2.73	0.65	66	3.48	0.63	67
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.71	0.45	66	3.76	0.46	67
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	66	3.75	0.50	67
4. Indicate how well each of the following contributed to the training:						
Group Participation	3.88	0.32	64	3.43	0.75	67
Visual Aids	3.75	0.50	60	3.61	0.55	66
Handouts	3.63	0.66	54	3.73	0.47	65
5. What is your overall evaluation of the training?	3.94	0.24	63	3.80	0.44	64
6. Did the instructor display a clear understanding of the content of the course?	4.00	0.00	66	3.91	0.29	67
7. Did the instructor have an effective style of presentation?	3.97	0.17	66	3.80	0.41	67
8. Did the instructor support the values and viewpoints of others?	3.86	0.35	66	3.77	0.47	67
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.86	0.42	66	3.78	0.45	67
10. Was the instructor helpful when students encountered difficulties?	3.89	0.32	66	3.80	0.44	64
11. Did the instructor establish and maintain good relations with the class?	3.94	0.23	66	3.81	0.40	64
12. Was the instructor clear and thoughtful when answering questions?	3.97	0.17	66	3.85	0.36	67
13. Did the instructor help you to develop an understanding of the subject matter?	3.97	0.17	66	3.81	0.46	67
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.42	66	3.66	0.51	67
15. Would you recommend this course to a friend?	3.97	0.17	66	3.79	0.47	67

<sup>a</sup> The number of individuals that responded to that item Note: For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent

Tabel #

Summary of Evaluations of Peer Support Training

Item	Session											
	1. Overview of CISD						2. Domestic Violence			3. Death Notification		
	Trainer 1			Trainer 2								
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>
1. How was the physical facility (seating, room size, work space, etc.)?	3.76	0.43	37				3.71	1.21	35	3.73	0.51	37
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.88	0.33	37				3.63	0.26	35	3.84	0.37	37
3. How well did the subject matter fulfil the stated objective of the program?	3.92	0.27	37				3.47	0.37	34	3.92	0.28	37
4. Indicate how well each of the following contributed to the training:												
Group Participation	3.92	0.27	37				3.53	0.37	34	3.76	0.44	37
Visual Aids	3.58	0.64	35				3.29	0.21	34	3.68	0.55	28
Handouts	3.63	0.48	36				3.27	0.19	33	3.86	0.35	37
5. What is your overall evaluation of the training?	3.88	0.33	37				3.33	0.47	34	3.94	0.34	35
6. Did the instructor display a clear understanding of the content of the course?	3.92	0.28	35	3.80	0.40	27	3.47	0.33	36	4.00	0.00	38
7. Did the instructor have an effective style of presentation?	4.00	0.00	35	3.80	0.40	27	2.78	0.16	36	3.97	0.28	38
8. Did the instructor support the values and viewpoints of others?	3.88	0.33	35	3.80	0.40	27	3.00	0.71	36	3.89	0.31	37
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.88	0.33	35	3.80	0.40	27	3.31	0.22	36	3.87	0.34	38
10. Was the instructor helpful when students encountered difficulties?	3.96	0.20	35	3.80	0.40	27	3.21	0.15	35	3.87	0.34	38
11. Did the instructor establish and maintain good relations with the class?	4.00	0.29	35	3.80	0.40	27	3.19	0.14	36	3.97	0.28	38
12. Was the instructor clear and thoughtful when answering questions?	3.96	0.20	35	3.90	0.30	27	3.36	0.45	36	3.97	0.16	38
13. Did the instructor help you to develop an understanding of the subject matter?	3.92	0.28	35	3.80	0.40	27	3.28	0.20	36	3.95	0.23	38
14. Did the instructor consistently begin and terminate classes on time?	3.83	0.37	35	3.70	0.40	27	3.42	0.29	36	3.84	0.37	38
15. Would you recommend this course to a friend?	3.96	0.20	35	3.95	0.22	27	3.37	0.26	36	3.95	0.23	38

<sup>a</sup> The number of individuals that responded to item. Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session											
	4. Family Systems			5. Chemical Dependency			6. Trainer 1 Child & Family Dealing with Trauma			Trainer 2. Relaxation Response		
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>
1. How was the physical facility (seating, room size, work space, etc.)?	3.74	0.50	34	3.67	0.53	36	3.94	0.52	36			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.79	0.40	34	3.81	0.40	36	3.64	0.59	36			
3. How well did the subject matter fulfil the stated objective of the program?	3.71	0.52	34	3.94	0.33	36	3.33	0.93	36			
4. Indicate how well each of the following contributed to the training:												
Group Participation	3.82	0.39	33	3.81	0.47	36	3.78	0.48	36			
Visual Aids	3.70	0.52	33	3.77	0.43	35	3.50	0.61	36			
Handouts	3.72	0.51	33	3.86	0.36	35	3.57	0.56	35			
5. What is your overall evaluation of the training?	3.69	0.53	32	4.00	0.00	36	3.44	0.65	36			
6. Did the instructor display a clear understanding of the content of the course?	3.80	0.57	35	3.97	0.16	37	3.23	0.88	35	3.80	0.50	36
7. Did the instructor have an effective style of presentation?	3.71	0.51	35	3.89	0.31	37	3.09	0.85	35	3.60	0.60	36
8. Did the instructor support the values and viewpoints of others?	3.65	0.48	34	3.86	0.42	37	2.80	0.99	35	3.50	0.70	36
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.60	0.60	35	3.81	0.40	37	3.16	0.10	35	3.60	0.60	36
10. Was the instructor helpful when students encountered difficulties?	3.71	0.51	35	3.84	0.37	37	2.91	0.92	35	3.60	0.70	36
11. Did the instructor establish and maintain good relations with the class?	3.77	0.48	35	3.92	0.28	37	2.77	1.11	35	3.60	0.60	36
12. Was the instructor clear and thoughtful when answering questions?	3.77	0.42	35	3.89	0.31	37	3.00	0.98	35	3.60	0.60	36
13. Did the instructor help you to develop an understanding of the subject matter?	3.74	0.50	35	3.89	0.31	37	2.89	1.02	35	3.40	0.70	36
14. Did the instructor consistently begin and terminate classes on time?	3.66	0.58	35	3.84	0.37	37	3.14	0.85	35	3.50	0.60	36
15. Would you recommend this course to a friend?	3.74	0.50	35	3.95	0.23	37	2.94	1.01	35	3.53	0.65	36

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=poor, 2=fair, 3=good, 4=excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.

Tabel #

Summary of Evaluations of Peer Support Training (continued)

Item	Session														
	7. Psychiatric Conditions			8. Ethics & Public Integrity			9. Research & Evaluation			10. L.E.A.F.S. Policy & Procedure					
	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	Trainer1			Trainer2		
									M	SD	n <sup>a</sup>	M	SD	n <sup>a</sup>	
1. How was the physical facility (seating, room size, work space, etc.)?	3.75	0.50	36	3.68	0.54	31	3.69	0.85	35	3.70	0.53	33			
2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?	3.94	0.23	36	3.77	0.50	31	3.80	0.53	35	3.91	0.29	33			
3. How well did the subject matter fulfil the stated objective of the program?	3.89	0.32	36	3.61	0.72	31	3.89	0.07	35	3.97	0.17	33			
4. Indicate how well each of the following contributed to the training:															
Group Participation	3.76	0.34	33	3.55	0.69	29	3.86	0.08	35	3.97	0.17	33			
Visual Aids	3.38	0.94	27	3.70	0.47	30	3.79	0.53	33	3.88	0.33	26			
Handouts	3.59	0.61	33	3.77	0.43	30	3.81	0.14	31	3.94	0.25	31			
5. What is your overall evaluation of the training?	3.81	0.40	36	3.70	0.54	30	3.85	0.08	34	4.00	0.00	32			
6. Did the instructor display a clear understanding of the content of the course?	3.94	0.23	36	3.80	0.41	30	3.86	0.08	36	4.00	0.00	33	4.00	0.00	33
7. Did the instructor have an effective style of presentation?	3.83	0.38	36	3.68	0.54	32	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
8. Did the instructor support the values and viewpoints of others?	3.72	0.45	36	3.47	0.73	30	3.74	0.52	35	3.97	0.17	33	4.00	0.00	31
9. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?	3.61	0.64	36	3.58	0.67	31	3.80	0.53	35	3.97	0.18	32	4.00	0.00	31
10. Was the instructor helpful when students encountered difficulties?	3.80	0.47	36	3.63	0.61	30	3.77	0.52	36	4.00	0.00	33	4.00	0.00	31
11. Did the instructor establish and maintain good relations with the class?	3.89	0.32	36	3.42	0.89	31	3.78	0.53	36	4.00	0.00	33	4.00	0.00	31
12. Was the instructor clear and thoughtful when answering questions?	3.58	0.35	36	3.71	0.53	31	3.75	0.52	36	4.00	0.00	33	4.00	0.00	31
13. Did the instructor help you to develop an understanding of the subject matter?	3.86	0.35	36	3.57	0.63	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31
14. Did the instructor consistently begin and terminate classes on time?	3.86	0.35	36	3.77	0.50	30	3.78	0.53	36	3.94	0.24	33	4.00	0.00	31
15. Would you recommend this course to a friend?	3.92	0.28	36	3.58	0.62	30	3.81	0.53	36	4.00	0.00	33	4.00	0.00	31

<sup>a</sup> The number of individuals that responded to the item Note: 1. For these scales 1=Poor, 2=Fair, 3=Good, 4=Excellent 2. For some training sessions, two trainers presented in a session. Items 1 through 5 were only rated once for that session and are recorded under the first trainer for the session.



## **TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT (L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

### **MISSION STATEMENT**

The Law Enforcement and Family Support program consists of multi-dimensional stress management services for law enforcement personnel within the state of Tennessee. In the state of Tennessee, the Sheriff's offices also include responsibility of incarceration of prisoners, therefore, including officers who serve as correctional personnel. Our goal was to be functional for all aspects of law enforcement.

The program consists of the following components:

1. Educational and preventative programs. Stress management programs are incorporated into the curricula of various training academies. Also, programs and presentations on various related topics are presented upon request to various law enforcement agencies and community organizations.
2. Statewide Critical Incident Stress Debriefing Teams (C.I.S.D.) for law enforcement personnel and their agencies have been successfully established in Middle and East Tennessee to lessen the impact of major events on law enforcement personnel. As a reactive service, the teams provide support to law enforcement personnel at the scene if notified, or after the encounter with the critical incident. This process has proven to be successful in these regions, and further training and services are necessary to include the entire state of Tennessee.
3. A resource and referral network is established to assist those law enforcement officers seeking specialty services. This includes but is not limited to: crisis intervention, peer support, post-traumatic stress disorder, family counseling and substance abuse referral services.
4. Family education and support programs to address the needs and concerns of loved ones of law enforcement personnel will be expanded to include the Western region of Tennessee, which was not offered in the present program.

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This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**PROBLEM AND MISSION STATEMENT**

Throughout the state of Tennessee and across the United States today, law enforcement personnel and administrators have become aware of the stressors unique to their profession. The stressors which law enforcement personnel are routinely exposed to, often manifest themselves in physical and/or psychological symptoms which the individuals may or may not be able to successfully work through on their own. Even individuals who can resolve problems on their own may experience a delay in the resolution without intervention. The end result is a decrease in the quality of the personal life of the law enforcement officer and professional abilities. Assisting law enforcement officers to resolve stress related difficulties requires specialized skills and knowledge.

Factors and events that may cause one individual to suffer the impacts of stress may have little or no effect on another. Research has demonstrated that very few law enforcement personnel are not affected by stressors that are inherent to their professions. It has also been demonstrated that the majority of those who demonstrate symptoms related to stress cannot resolve these issues on their own, and continue to be affected.

The stress response may take several forms. It may be an immediate response to a specific incident in which the officer has participated, or the response to this event may be delayed and resurface after a period of time; thus, intervention is offered and will have positive impact on the individual. The stress response may be the product of exposure of too many events resulting in a cumulative effect. How an individual is affected by stress will depend on several factors: the nature of the stressor must be considered as well as the individual's personal attributes, his previous successes or failures with coping, and the resources and support available to him.

The law enforcement officer is, by virtue of his profession, faced with certain events that have the potential to create a significant stress reaction. These have been termed "critical incidents", which is defined as "any situation faced by a law enforcement officer that causes them to experience unusually strong emotional reactions which have the potential to interfere with their ability to function either at the scene or later. All that is necessary is that the incident, regardless of type, generates unusually strong feelings in the enforcement professional."

Certain events have been demonstrated to be particularly distressing for law enforcement personnel. Research has indicated hundreds of emergency service related stressors. The events surfacing most frequently can be divided into two different categories, environmental stressors and clinical stressors.

#### ENVIRONMENTAL STRESSORS INCLUDE:

- Working in extremes of weather
- Environmental hazards
- Problems with administration
- Lack of recognition
- Limited ability for career advancement
- Limited resources (personnel, equipment, funding)

#### CLINICAL STRESSORS INCLUDE:

- Violent death of a fellow officer in the line of duty
- Taking a life in the line of duty
- Shooting someone in the line of duty
- Suicide of an officer who was a close friend
- Responding to the scene of gruesome suicide or homicide
- Suicide by police
- A duty related disabling injury to yourself
- Duty related violent injury or death to a violator
- Violent job related injury to another officer
- High speed pursuits resulting in an injury or death
- Pursuit of an armed suspect
- Answering a call to a scene of the violent non-accidental death of a child
- Brutal child abuse cases
- Personal involvement in a shooting incident
- Hostage situations
- Prolonged exposure to an incident (hostage situation) or rescue attempts that end in death
- Barricaded suspects
- Responding to the scene involving the accidental death of a child
- Multiple fatality automobile accident
- Plane/helicopter crashes involving injury or death
- Man-made disasters (bombing, etc.) involving injury or death
- Natural disasters (floods, hurricanes, tornadoes, etc.)
- Incidents that attract unusually strong media coverage
- Any incident charged with profound emotion
- Personal identification with the victim or his circumstance(s)
- Any incident where sights, sounds, or smells are so distressing as to produce a high level of immediate or delayed emotional reaction.

The stress exposure for law enforcement personnel is not limited to the mechanism of their vocation. Public and personal expectations of these officers are high. The public assumes that law enforcement officers and public service personnel are devoid of normal human emotion as they perform their duties in a calm and cool manner. This is not true. The law enforcement officer enters this profession because of great empathy for his fellow man and a sincere desire to assist during times of significant need. They also add to their own stress levels by failing to recognize and deal effectively with these stressors in the profession. Their peers often view admitting the need to seek mental health support as a sign of weakness in these individuals. Thus, many officers have elected to cope with the stressors by adopting mechanisms with emphasis placed on emotion and reaction suppression and trying to hide the fact that law enforcement may be "getting to them". Law enforcement officers who have sought mental health support report that some counselors were not receptive to the details of events that brought them into counseling. The counselors expressed that they did not have enough knowledge or background in emergency service operations to fully appreciate or understand the plight of the law enforcement officer. Through the training provided in our L.E.A.F.S. Project, this has been decreased in our state, due to the training received by the mental health professionals who applied for inclusion in our research project.

Law enforcement officers need specialized programs designed for their specific personality profiles and addressing issues specific to their profession. Normal therapeutic remedies performed by persons with no experience with law enforcement operations are generally not effectual. Cross-training of mental health providers and the incorporation of peer support personnel into the training and therapeutic process has been proven most successful.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**PROJECT ADMINISTRATION**

**LEAD AGENCY**

The Tennessee Sheriffs' Association, Inc. will serve as the Lead Agency for all law enforcement departments/agencies participating in the Law Enforcement and Family Support Project, supporting all services under the L.E.A.F.S. project. This includes the Critical Incident Stress Debriefing Teams, Peer Support Teams, Family Support Teams, Shoot Teams, program material development, education and research. It will be the responsibility of the L.E.A.F.S. project to afford the resources necessary services within Grant budgetary restraints.

- Coordinating "in-kind" services
- Selection of the Program Manager
- Selection of Advisory Board Members
- Oversee and support the activities of the Project
- Provide administrative support for Project Activities
- Provide office support services and facilities for administration of the L.E.A.F.S. Project
- Contracted consultation services for project training and operations.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

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**PROGRAM MANAGER**

The Program Manager is responsible for overall management of the L.E.A.F.S. Project and its implementation. Specifically, the job description of the Program Manager is to:

- Oversee the functioning of the Project with the support of Grant Team members
- Establish and follow administrative and budgetary guidelines as set forth by the National Institute of Justice, and provide progress reports and communication to the N.I.J as mandated by their Policies and Procedures
- Implementation of all Policies and Procedures
- Schedule and attend all Advisory Board meetings
- Maintain quality control, and adherence of confidentiality policies and procedures
- Program promotion/advertisement
- Solicit trainees/volunteers for the Project
- Maintain records of requests for debriefings following Federal Regulations
- Oversee dispatch, functions and activities of the CISD Teams and Team Coordinators
- Oversee functions and activities of Peer Support officers
- Assign Team Leaders to provide debriefings for team members when necessary
- Solicit support from appropriate agencies
- Oversee periodic Team meetings
- Maintain records of Team activity in accordance with Federal Regulations
- Maintain Records and documents of Project in accordance with Federal Regulations
- Keep updated lists for referrals
- Set up training sessions, seminars, in-services and continuing educational programs
- Oversee research and development of curriculums for stress management
- Establish a network of agencies participating in the Project
- Establish a network of qualified mental health professionals
- Assist in Project material development
- Assist in development of Policy and Procedures for CISD
- Assist in interviews and selection process of additional CISD Team members
- Assist in interviews and selection process of appropriate mental health team professionals
- Oversee videotaping of CISD program for Law Enforcement Satellite Academy Training
- Assist in establishing BOLO meetings throughout the state
- Assist in research and development of C.O.P.S. Chapter in Tennessee
- Assist in completing final report as mandated by the National Institute of Justice

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
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**PROGRAM AND TRAINING COORDINATOR**

The Program and Training Coordinator will assist and report directly to the Program Manager, and will serve as the "Designee" of the Program Manager in his/her absence. Oversees the development, coordination and facilitation of all training programs listed below, with emphasis on the western region of Tennessee:

- Command Level Staff Training
- Critical Incident Stress Debriefing training
- Peer Support officer training
- Family Support training in the Eastern and Western regions of Tennessee
- Recruit and Family Stress Inoculation Training
-

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**CLINICAL ADVISOR**

The Clinical Advisor in cooperation with the Program Manager and Program and Training Coordinator, will oversee the delivery and quality of counseling services. Specifically, the duties of the Clinical Advisor will be:

- Offer quality assurance for professional CISD Team members
- Participate in the debriefings and monitor the debriefing process
- Assist in establishing "cross-training" programs for CISD Team members
- Assist the Program Coordinator in establishing protocols for debriefings
- Assist in the selection of peers and a Peer Review Board
- Search for and participate on a selection committee and interview appropriate mental health professionals, and provide sensitivity training
- Maintain an updated list of appropriate referral sources
- May follow-up debriefing contacts if necessary
- Offer clinical support and guidance to the Program Coordinator and Team members
- Must be self insured
- Must be licensed qualified mental health professional in good standing with the state licensing/certification board of the State of Tennessee and never had said license/ Certification suspended or revoked in any state.

The Clinical Advisor will work directly with and be responsible to the L.E.A.F.S. Program Manager and Program and Training Coordinator.

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**COMMUNICATION SPECIALIST**

The selected Communication Specialists will often be the first line of contact with agencies or individuals seeking L.E.A.F.S. services, to include requests for defusings, debriefings, and Family and Peer Support services. Therefore, the Communication Specialists will become aware of the various services of the Program and recognize the importance of their role and delivery of services. The Communication Specialist will inform the Program and Training Coordinator or Program Manager of all requests for services.

Specifically, the duties of the Communication Specialist will be:

- Comply with all Federal and State guidelines involving confidentiality of program participants, incidents, and debriefings and L.E.A.F.S. policies and procedures regarding same
- Shall attend awareness and sensitivity training regarding officers and family support
- Adhere to all protocols for notification to L.E.A.F.S. Program and Training Coordinator or his designee for activation and response of Team members
- Furnish all information received for requests for services in a safe and confidential manner as outlined in Federal regulations regarding research data

**ADMINISTRATORS AND OFFICERS**

The administrators and officers of agencies being supported will be an important link in the program. They will often be the first to recognize the need for support services. Therefore, this group will be educated and familiar with the program and its services and the mechanism by which they can avail themselves of the services.

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**PROGRAM SECRETARY**

The Program Secretary, in cooperation with the Program Manager and Program and Training Coordinator, will maintain necessary accounting records for required audits. Specifically, the duties of the Program Secretary will be:

- Comply with all Federal and State guidelines involving confidentiality of program participants, incidents, and debriefings and L.E.A.F.S. policies and procedures regarding same
- Assist with day to day operations
- Assure accordance with generally accepted auditing standards for the State of Tennessee and the National Institute of Justice
- Assure conformity with generally accepted accounting principles
- Assist with preparation of documents and reports as needed
- Maintain all training records and evaluations, team personnel files.

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**PRINCIPAL INVESTIGATORS**

Due in part on the size of the study, the geographical area to be covered, there are two Principal Investigators, who will work in cooperation with the Program Manager and Program Coordinator to ensure independent collection and analysis of baseline study, pre-test, posttest and Focus Groups associated with each grand division of the State of Tennessee.

Specifically, the duties of the Principle Investigators will be:

- Comply with all Federal and State guidelines involving confidentiality of program participants, incidents, and debriefings and L.E.A.F.S. policies and procedures regarding same
- Prepare process and impact evaluations
- Establish program operations objectives
- Assess client satisfaction with program services
- Using recognized statistical methods, analyze data and report the results

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**TEAM SELECTION COMMITTEE**

The Team Selection Committee will review the applications for additional volunteer membership into the Program. They will review the applications, make reference contacts, determine which candidates will be selected to receive initial training, interview candidates when applicable, and make final selection of members.

The committee will be comprised of members selected by the L.E.A.F.S. Program Manager. Committee members will include:

- Training Coordinator
- Clinical Advisor (for applications related to Mental Health Professionals)
- Two Law Enforcement Officers
- A representative from both the Tennessee Sheriffs' Association and the Tennessee Association of Chiefs of Police.

**Additional Team Members will be selected utilizing the following protocols:**

**MENTAL HEALTH PROFESSIONALS AS TEAM MEMBERS**

- A. "Qualified mental health professional" means a licensed psychologist or psychological examiner, a certified or licensed social worker, a certified marital and family therapist or a licensed professional nurse who functions as a psychiatric mental health nurse. (Definition as set forth in Tennessee Code Annotated 33-10-301(2).)
- B. Professional Training: mental health team members must have specific training in the following:
- Crisis intervention
  - Stress knowledge
  - Group process
  - Directive intervention
  - Willingness to be cross trained in police services (ride alongs, etc.)
  - Post traumatic stress disorders
  - Human communications

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**MENTAL HEALTH TEAM MEMBERS**

The mental health professionals who participate in the CISD teams are volunteers who assist primarily in the debriefing process and may assist in further program development. They may also be available for individual referrals, if requested. Specifically, the mental health professional will:

- Comply with all Federal and State guidelines involving confidentiality of program participants, incidents, and debriefings
- Complete cross-training requirements
- Assist in developing referral sources
- Make themselves available as referral sources if requested by Project staff
- Assist the Project Manager in determining the need for a debriefing as appropriate
- Participate in the debriefing process
- In consultation with the Project Manager or his designee, make post-debriefing contacts and suggest further counseling as necessary
- Must be self insured
- Must be licensed qualified mental health professional in good standing with the state licensing/certification board of the State of Tennessee and never had said license/ Certification suspended or revoked in any state.
- One of thirty (30) mental health professionals available on a 24-hour, 7-day a week rotating schedule within the geographical area (10 mental health professionals per region to respond to critical incidents)

"Qualified mental health professional" means a licensed psychologist or psychological examiner, a certified or licensed social worker, a certified marital and family therapist or a licensed professional nurse who functions as a psychiatric mental health nurse. (Definition as set forth in Tennessee Code Annotated 33-10-301(2).)

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
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**REVOCACTION / SUSPENSION OF MEMBERSHIP**

Membership is revocable at the discretion of the Program Manager, Program Coordinator and Peer Review Board. Action is appropriate for but not limited to the following:

1. Failure to maintain strict confidentiality regarding CIS debriefings held, including topics discussed and personnel involved. Any breach in confidentiality will result in the immediate removal from the team and the Program.
2. Failure to follow all local protocols and directives regarding team or program activity.
3. Organizing or in any way attempting to organize any type of debriefing without the Program Coordinator's knowledge or approval.
4. Organizing or in any way attempting to organize any CISD activity or stress management program without the prior knowledge or consent of the Program Manager.
5. Going to the scene or place of an incident to act on behalf of the L.E.A.F.S. Program or the Team without the prior knowledge or consent of the Program Manager and/or his designee.
6. Failure to be present at an assigned debriefing when the member has made a commitment to do so.
7. Continued absenteeism at Team meetings or training.
8. Acting against the expressed direction of the Program Manager, the Clinical Advisor, or the Peer Review Board.
9. Any misrepresentation of the affairs or operations of the CISD Team or the L.E.A.F.S. Program.
10. Failure to complete required paperwork as provided for in policies and procedures as established by L.E.A.F.S.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**PEER SUPPORT OFFICER PERSONNEL (P.S.O.)**

The Peer Support Officer will assist in the debriefing process and will be involved in development and delivery of other programs. These duties will include:

- Adhere to program confidentiality mandates
- Provide crisis intervention by responding to a law enforcement officer's needs during acute emotional and/or physical distress, i.e.: substance abuse and health related issues.
- Act as a referral resource for services in their communities
- Assist in dissemination of all program promotional material
- Screen officers and family members to determine their appropriateness and eligibility for participation in a particular program or service offered by L.E.A.F.S. and/or other community services
- Assisting Program and Training Coordinator in the education and training in early intervention techniques for officers and their families
- Conduct individual family peer support through the exploration of problems, examination of feelings and attitudes and consideration of alternate solutions
- Dissemination and collection of program research materials
- Maintain a listing of approved professional resources for potential referrals
- Respond to 24-hour pager coverage, 7 days a week, on a rotational schedule within their geographical region
- Recognize that selection as a P.S.O. is voluntary, and be available to provide support and make a reasonable attempt to remain available to an officer or his/her family, should he/she be contacted
- Initiate contact with those who have responded to a critical incident at the request of the Program Manager or his designee
- Estimate number of persons involved
- Perform initial assessment of the need for a debriefing
- Contact Program Manager, but do not begin debriefing process
- At the request of the Program Manager or his designee, provide defusing services
- Attend team meetings and in-services
- Make post debriefing contacts as assigned
- Assist the Program Manager as required
- Serve as a member of the Peer Review Board as assigned
- Assist in the development of L.E.A.F.S. Program
- Be aware of their limitations and seek guidance and assistance when in question or where appropriate

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

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**PEER SUPPORT PERSONNEL  
(Debriefers)**

- A. Qualities: each peer support team member should possess the following:
- Sworn law enforcement officer
  - Maturity
  - Respected and trusted among peers
  - Ability to keep and maintain confidentiality (under State and Federal laws)
  - Psych/social work background (a plus - not mandatory)
  - Sensitivity to others
  - Ability to learn about psych/social process
  - Ability to adhere to L.E.A.F.S. policies and procedures
  - Adhere to established limits and criteria

**TEAM MEMBERSHIP LENGTH OF SERVICE**

- A. Volunteer team members serve a minimum period of 18 months
- B. Any volunteer member wishing to drop membership on the team for any reason will discuss the matter with the Program Manager or Clinical Advisor and submit their resignation in writing. At the conclusion of the membership, current membership will be evaluated. Members must express their desire to remain active for another year and remain on the team with the approval of the coordinator and the committee.
- C. Vacancies will be discussed by the team and recommendations made to the Program Manager regarding replacing members on the basis of:
1. Number of vacancies
  2. Type of vacancy
  3. Current membership
  4. Time interval to end of term
  5. Availability of training funds/opportunity





**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**TEAM TRAINING**

Training is the key to a successful program. The training will take several forms and be presented by professionals trained in stress management in law enforcement.

An initial one day Command Level Staff Training on Critical Incident Stress Debriefing, Post Shooting Trauma, Stress in the Law Enforcement Family, and Grant (L.E.A.F.S.) Policies - Goals and Objectives will be presented in three (3) locations across the state of Tennessee. This training will instill basic knowledge on the topics listed above, and Team selection and training. This program will be presented by Paul Jennings, Program Manager and Peter Cove, Program and Training Coordinator.

Training for those selected wishing to serve as volunteers in the program will take several forms. The first will be a mandatory three (3) day CISD training, certified by the International Critical Incident Stress Foundation, held in Nashville, Tennessee at the Tennessee Law Enforcement Training Academy. Initially, two training sessions will be held, April 17-19, and May 1-3, 1998. with additional training in CISD provided throughout the length of the grant to maintain appropriate staffing levels. This course will add definition to the roles and responsibilities of Team members; the debriefing and intervention process; team protocols; and a more in depth look at the topic of Critical Incident Stress. All selected volunteers (law enforcement officers and mental health professionals) will attend these training sessions.

The next phase of training will consist of Peer Support Training. This program is designed to train individuals to provide peer support services to other officers and their families. Specific training in communication skills, helping skills, alcohol and other drug abuse, family issues, stress-related issues, ethics, interactions with mental health professionals and therapists, and how to make referrals are all included. Policies and procedures for Peer Support Team development, implementation, and operations will be discussed. The training includes lecture, discussion, and experiential exercises.

This residential training will consist of forty-six (46) hours of instruction, scheduled for Monday, May 18 through Friday, May 22, 1998.

After this initial training, the Law Enforcement Family Support Training will begin. These workshops will provide family support team members (spouses, family members and others who are significant in the officers' lives) an opportunity to develop an understanding of the ways in which their stresses impact each other, and how they can provide important support to one another and family members of law enforcement officers in middle Tennessee that are seeking assistance. These workshops will be conducted in six (6), four (4) hour modules over seven (7) weeks in afternoon or evening sessions.

(Con't.)

Law Enforcement Stress Inoculation training will be provided to Basic Police Recruits and their families while attending the Tennessee Law Enforcement Training Academy in Middle Tennessee and Walters State Basic Police School in East Tennessee during the duration of the Grant. This training program is designed to prepare law enforcement recruit officers and their family members to deal with the stressors faced on a daily basis in a manner that is healthy and limits or eliminates serious impact on the individual, the family, the agency and the community.

Meetings for all Team members will be held approximately every six (6) weeks. Our goal is to provide in-service and continuing education at each team meeting. Many of these topics will be determined by the team members, by areas of training not previously completed and new programs that will be developed and incorporated as the Program grows.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**CRITICAL INCIDENT STRESS DEBRIEFERS -- TEAM MEMBERS**

**Description:**

It is a well known and accepted fact that law enforcement officers often work in traumatic situations, many of which may be life threatening for the officer, other public safety professionals, or the public. As a consequence, the officers may be impacted in a number of ways, affecting the officer personally and professionally, the agency and the officers' families. A process known as Critical Incident Stress Debriefing (CISD) has been shown to decrease the impact of such incidents both short-term and long-term. To be effective, the CISD is conducted by a team, which includes specially trained peers (other law enforcement officers). Both mental health professionals and law enforcement team personnel form a pool of CISD Team members from which a Response Team is developed.

- Comply with all policies and procedures of the L.E.A.F.S. Program
- Comply with all Federal and State guidelines involving confidentiality of the program and the debriefing process
- Must have completed three-day basic CISD training
- Be available on a twenty-four (24) hour, seven (7) day a week rotational schedule within their geographical region, to respond to critical incidents
- Attend all Team meetings and training
- Provide on-scene support services under the direction of the Team Coordinator
- Assist Team Coordinators in dissemination of L.E.A.F.S. educational materials and collection of research-based data
- Attend post-debriefing defusings for CISD responders
- Be aware of their limitations and seek guidance and assistance when in question or when appropriate

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**MEMORANDUM OF UNDERSTANDING**

I, \_\_\_\_\_, the undersigned agree that if I am selected as a member of the Tennessee Law Enforcement And Family Support Critical Incident Stress Debriefing Team, I will serve as a volunteer team member for a period of eighteen (18) months. I understand that serving as a team member requires the following commitment and obligations:

1. Attendance and full participation in the three (3) day Basic Critical Incident Stress Debriefing training
2. Attendance at additional training sessions as may be required.
3. Completion of cross training as may be required.
4. Attend scheduled team meetings (approximately every 6 weeks)
5. Complete any required records or paperwork
6. Revocation/suspension of my membership will occur under the following circumstances but is not limited hereto:
  - A. If I fail to maintain strict confidentiality regarding Critical Incident Stress debriefings held, including topics discussed and personnel involved. Any breach in confidentiality will result in immediate removal from the team and the program.
  - B. If I fail to follow all local protocols and directives regarding L.E.A.F.S. activity
  - C. If I organize or in any way attempt to organize a debriefing without the Program Manager having prior knowledge and approval.
  - D. If I organize or in any way attempt to organize any Critical Incident management activity or program without the Program Manager's prior knowledge or approval
  - E. If I go to the scene or place of an incident to act on the behalf of the L.E.A.F.S. program or the Team without the prior knowledge or consent of the Program Manager
  - F. If I fail to be present at an assigned debriefing or activity when I have made a commitment to do so
  - G. If I act against the expressed direction of the Program Manager or Clinical Advisor
  - H. If I misrepresent the affairs or operations of the L.E.A.F.S. Program
  - I. If I am habitually or continually absent from scheduled Team meetings

I understand that being selected to attend the preliminary training session does not insure me a position on the team or within the program.

The Law Enforcement And Family Support Program agrees to provide the following:

1. Continuing training of current research, findings and theories of law enforcement occupational stress and related topics
2. Critical Incident Stress Debriefing training certified by the International Critical Incident Stress Foundation. To guarantee attendance of the three (3) day Basic CISD Training, there will be a registration fee of \$125.00, payable in advance, to hold your space in the class. This amount is immediately refundable upon completion of the training. Candidates who fail to attend will forfeit their registration fee. The L.E.A.F.S. Program will provide me with the dates and times of training sessions to be offered.
3. Administrative support
4. Debriefing for the Debriefing Team members after a CISD when necessary or requested.
5. Reevaluation of team operations and personnel every six months
6. Maintenance of quality standards in performance and confidentiality in personnel (team members), and operation
7. CISD Team Member identification for each team member.

I have read and understand these commitments and obligations and will agree, if selected, to serve as a volunteer for the L.E.A.F.S. CISD Team and to abide by all protocols.

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Signature

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Date



# Tennessee Sheriffs' Association, Inc.

2815 PATRIOT WAY • NASHVILLE, TENNESSEE 37214-3541

TELEPHONE (615) 885-7511

FAX (615) 885-5785

Dear Law Enforcement CISD Team Applicant:

EXECUTIVE DIRECTOR

BILL THOMAS

The Tennessee Sheriffs' Association, Inc. has been awarded a National Institute of Justice Grant Award # 97-FS-VX-0005 for Law Enforcement and Family Support services. The Tennessee Project, known as "L.E.A.F.S." is currently looking for sworn law enforcement officers from various agencies throughout the state to serve as CISD team members. The services and training provided under this grant are available to every law enforcement agency and their personnel in the state of Tennessee. There are 90 volunteer positions available to serve as debriefers.

It is a well-known and accepted fact that law enforcement officers often work in traumatic situations, many of which may be life threatening for the officer, other public safety professionals, or the public. As a consequence, the officer may be impacted in a number of ways, affecting the officer personally and professionally, the agency and the officer's family. A process known as Critical Incident Stress Debriefing (CISD) has been shown to decrease the impact of such incidents both short-term and long-term. To be effective, the CISD is conducted by a team, which includes specially trained peers (other law enforcement officers and mental health professionals). Both mental health professionals and law enforcement team personnel form a pool of CISD Team members from which Response Teams are developed and activated. This training program is designed to provide officers with the background, theory, and skills required to be a valuable part of a CISD team. It exceeds the curriculum required by the International Critical Incident Stress Foundation, and addresses issues specific to law enforcement.

#### Qualifications and attributes required:

1. Sworn law enforcement officer
2. Commitment to program goals and an interest in the general welfare of law enforcement officers and their families
3. Ability to plan and organize
4. Ability to communicate with people on a personal level
5. Ability to maintain impartiality and neutrality (non-judgmental)
6. Ability to maintain confidentiality
7. Proven interpersonal skills
8. History of productive relationships with fellow officers
9. Skills as a good listener
10. Flexibility and willingness to respond to critical incidents on a rotational schedule within their geographical region
11. An eighteen (18) month commitment to service as a CISD Team member

The training for those selected as members of the CISD teams will be held at the Tennessee Law Enforcement Training Academy for officers from East and Middle Tennessee on May 1-3, 1998; and officers from West Tennessee will attend on May 15-17, 1998. Lodging will be provided at the Academy, and reimbursement for meals will be made at the completion of the last day of training at \$24.00 per day.

Please fill out the attached application in its entirety and return (along with any supporting materials) by March 27, 1998 to:

XXXXXXXXXXXX, Program Manager  
Tennessee Law Enforcement And Family Support Project  
2815 Patriot Way  
Nashville, TN 37214-3541

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

*Leadership in Law Enforcement*

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**CRITICAL INCIDENT STRESS DEBRIEFING TEAM  
MEMBERSHIP APPLICATION**

**LAW ENFORCEMENT PEER DEBRIEFER**

**1. PERSONAL INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

**2. EDUCATION -- List most recent first**

<u>Institution</u>	<u>Program/Major</u>	<u>Date</u>	<u>Degree/Certification</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**3. EMPLOYMENT INFORMATION -- List most recent first**

<u>Place</u>	<u>Job description/Responsibilities</u>	<u>Length of employment</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

**4. MEMBERSHIP IN LAW ENFORCEMENT ORGANIZATIONS**  
(List names and dates)

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**5. PARTICIPATION IN COMMUNITY ACTIVITIES**  
(List names and dates)

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**6. SUPPLEMENTAL INFORMATION**

List and describe any formal training you have received in stress management, crisis intervention, post traumatic stress disorders, counseling, etc. List and describe any related workshops or conferences.

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**7. Comments or additional information you would like us to have about you to aid in the CISD Team selection process:**

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8. How much flexibility do you have to go on a debriefing on a 24-48 hour notice?

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9. List stress management techniques you have utilized effectively:

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10. List three (3) personal references that can attest to your work in law enforcement or could support your role on this team:

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**PLEASE RETURN THIS APPLICATION TO:**

Paul E. Jennings, Program Manager  
Tennessee Law Enforcement And Family Support Project  
2815 Patriot Way  
Nashville, TN 37214-3541

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database**

Please print the requested information below and attach your current CV, a copy of your current license and your malpractice insurance face sheet. Please PRINT or TYPE legibly, using BLACK ink, since your application form will be scanned into a computer. Thanks.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: (circle) Ms. Mr. Dr. Social Security #: \_\_\_\_\_ Degree: \_\_\_\_\_

Office Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: ( \_\_\_\_ ) \_\_\_\_\_

1. Are you licensed or certified in the state of Tennessee?  Yes  No
2. If yes, licensed/certified as a \_\_\_\_\_ License # \_\_\_\_\_
3. When does your current license expire? \_\_\_\_\_
4. Do you maintain Professional Liability insurance with a minimum coverage of \$1 million/\$3 million?  Yes  No
5. What is the date of expiration of your current Professional Liability policy? \_\_\_\_\_
6. Is it generally possible for you to schedule an appointment with a program participant within 24 hours?  Yes  No
7. Do you have a sliding fee scale?  Yes  No
8. Do you presently have time available to accept law enforcement referrals?  Yes  No
9. Are you affiliated or have privileges with any hospital, treatment center or group practice, and if so, where?  Yes, \_\_\_\_\_  No
10. Do you have professional experience working with or providing services to law enforcement personnel?  Yes  No
11. Are you currently or have you in the past, contracted with or provided services to any law enforcement organization or agency, and if so, in what capacity?  Yes, \_\_\_\_\_  No
12. Are you qualified to perform Fitness for Duty evaluations on police officers?  Yes  No
13. Are you interested in joining a special team of clinicians who will be available for emergencies at ANY time of the day or night?  Yes  No
14. Identify up to 3 areas of specialization for your 1998 listing, (enclose supporting documentation, if any):  
 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**For Office Use Only:** CV:  LIC:  MALPrac:  Re-interviewed:  Yes  No By: \_\_\_\_\_

Accepted 1998:  Yes  No Reason: \_\_\_\_\_ Date: \_\_\_\_\_

Added to 1998 database  Date: \_\_\_\_\_ By: \_\_\_\_\_

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database (Con't.)**

For the following questions, please attach a complete written explanation for any "yes" response:

1. Have you ever been convicted of a felony?  Yes  No
2. Have any malpractice claims ever been made against you including claims currently pending, claims that have been settled or claims that have resulted in judgments?  Yes  No
3. During the past 10 years, has any professional organization or regulatory board declared any actions by you to be unethical, or are you currently under investigation for any actions of unethical conduct?  
 Yes  No
4. Have you ever testified in a court of law against a law enforcement officer?  Yes  No
5. Has your professional license in this state or any other state ever been revoked, suspended or limitation imposed or have you been subject to any other disciplinary action by a public agency, insurance company or professional organization?  Yes  No

Please list the primary insurance companies that are available and that our program participants may utilize. Please indicate whether or not you are currently an in-network participating provider for any of the following programs:

<i>Program Name</i>	<i>Type of Program</i>	<i>Are you IN-Network?</i>	<i>Provider ID Number</i>
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**ALL MATERIALS MUST BE RECEIVED NO LATER THAN XXXXX XX, XXXX!!!!**

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database (Con't.)**

In the space provided below, list any additional insurance companies for which you are authorized as a provider. Indicate if you are IN or OUT of network. Also, indicate if you are willing to accept assignment.

<i>Program Name</i>	<i>Type of Program</i>	<i>Are you IN-Network?</i>	<i>Will you accept Assignment?</i>	<i>Provider ID Number</i>
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
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		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		

*Return your completed application along with all supporting materials to:*

XXXXXXXX  
 Law Enforcement And Family Support Project  
 XXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXX, XX XXXXX-XXXX

*Incomplete applications will not be processed. Please make sure you have enclosed the following:*

- This application - filled out completely
- A copy of your current Tennessee license/certification
- A copy of your Professional Liability Insurance face sheet showing limits of \$1 million/\$3 million
- A copy of your current Curriculum Vita (Resume)
- Copies of any specialty certification, e.g. ABPP, AAMFT Clinical Membership, CAC, etc.

If selected for consideration, you will be contacted by a representative of the L.E.A.F.S. Program with dates and times of interviews. If you have any questions, please call XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX.

**ALL MATERIALS MUST BE RECEIVED NO LATER THAN XXXXX XX, XXXX!!!!**

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.







**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**INTERVENTION REQUEST**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

CALL RECEIVED FROM: \_\_\_\_\_

CONTACT PERSON NAME: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_

AGENCY CHIEF OFFICER/ADMINISTRATOR: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Is this person aware of the request?  Yes  No

NATURE AND LOCATION OF INCIDENT: \_\_\_\_\_

URGENCY OF REQUEST: \_\_\_\_\_ IMMEDIATE CONTACT

\_\_\_\_\_ CAN WAIT UNTIL MORNING (IF AT NIGHT)

\_\_\_\_\_ OTHER: \_\_\_\_\_

DIRECTIONS: \_\_\_\_\_

NUMBER OF PERSONS EXPECTED: \_\_\_\_\_

ADDITIONAL DATA / COMMENTS: \_\_\_\_\_

TEAM MEMBERS: \_\_\_\_\_

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**INTERVENTION REPORT**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

DATE OF INTERVENTION: \_\_\_\_\_

TYPE OF INTERVENTION: \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

TEAM MEMBERS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NATURE OF INCIDENT: \_\_\_\_\_

NUMBER OF PARTICIPANTS: \_\_\_\_\_

GENERAL IMPRESSIONS OF INTERVENTION SERVICES: \_\_\_\_\_

RECOMMENDATIONS FOR FOLLOW-UP: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**DEBRIEFING REQUEST**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

CALL RECEIVED FROM: \_\_\_\_\_

CONTACT PERSON NAME: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_

AGENCY CHIEF OFFICER/ADMINISTRATOR: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Is this person aware of the request?  Yes  No

NATURE AND LOCATION OF INCIDENT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

URGENCY OF REQUEST: \_\_\_\_\_ IMMEDIATE CONTACT  
\_\_\_\_\_ CAN WAIT UNTIL MORNING (IF AT NIGHT)  
\_\_\_\_\_ DEBRIEFING WITHIN 24-48 HOURS

LOCATION OF DEBRIEFING: \_\_\_\_\_

DIRECTIONS: \_\_\_\_\_

DATE AND TIME OF DEBRIEFING: \_\_\_\_\_

NUMBER OF PERSONS EXPECTED: \_\_\_\_\_

ADDITIONAL DATA / COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**DEBRIEFING REPORT**

DATE: \_\_\_\_\_

DATE OF INCIDENT: \_\_\_\_\_

LOG #: \_\_\_\_\_

DATE OF DEBRIEFING \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

DEBRIEFERS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NATURE OF INCIDENT: \_\_\_\_\_

NUMBER OF PERSONS ATTENDING: \_\_\_\_\_

GENERAL IMPRESSIONS OF DEBRIEFING: (No names or issues of confidentiality)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RECOMMENDATIONS FOR FOLLOW-UP: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**ACTIVITY / PROGRAM REQUEST / REPORT**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

REQUESTING PARTY: \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_

AGENCY CHIEF OFFICER/ADMINISTRATOR: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Is this person aware of the request?  Yes  No

TYPE OF PROGRAM / ACTIVITY REQUESTED: \_\_\_\_\_

DATE OF REQUESTED PROGRAM / ACTIVITY: \_\_\_\_\_ TIME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

DIRECTIONS: \_\_\_\_\_

NUMBER OF PERSONS EXPECTED: \_\_\_\_\_

ADDITIONAL DATA / COMMENTS: \_\_\_\_\_

TEAM MEMBER ASSIGNED: \_\_\_\_\_

FOLLOW UP COMMENTS: \_\_\_\_\_

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**"CONFIDENTIAL"**

***PROGRAM COORDINATOR – CISD TEAM***

**Peter Cove**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**Bill Thomas**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**Betty Pritchett**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**East Tennessee**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**West Tennessee**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**Middle Tennessee**

PAGER:  
HOME:  
WORK:  
OFFICE:  
DEPARTMENT:  
CAR PHONE:

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

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***POLICE PEERS:***

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***DISPATCHER PEERS:***

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***FAMILY SUPPORT PEERS:***

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***LIST OF ALL SHERIFFS, CHIEFS OF POLICE AND HEADS OF OTHER  
TENNESSEE LAW ENFORCEMENT AGENCIES***

***TO INCLUDE: AGENCY TELEPHONE NUMBER, PRIVATE OFFICE  
NUMBER (IF POSSIBLE) PAGER NUMBER AND CELLULAR PHONE  
NUMBER***

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

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**DEFUSING REQUEST**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

CALL RECEIVED FROM: \_\_\_\_\_

CONTACT PERSON NAME: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_

AGENCY CHIEF OFFICER/ADMINISTRATOR: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Is this person aware of the request?  Yes  No

NATURE AND LOCATION OF INCIDENT: \_\_\_\_\_

URGENCY OF REQUEST: \_\_\_\_\_ IMMEDIATE CONTACT

\_\_\_\_\_ CAN WAIT UNTIL MORNING (IF AT NIGHT)

\_\_\_\_\_ OTHER: \_\_\_\_\_

DIRECTIONS: \_\_\_\_\_

NUMBER OF PERSONS EXPECTED: \_\_\_\_\_

ADDITIONAL DATA / COMMENTS: \_\_\_\_\_

TEAM MEMBERS: \_\_\_\_\_

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

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**DEFUSING REPORT**

LOG #: \_\_\_\_\_

DATE: \_\_\_\_\_

DATE OF DEFUSING: \_\_\_\_\_

AGENCY NAME: \_\_\_\_\_

TEAM MEMBERS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NATURE OF INCIDENT: \_\_\_\_\_

\_\_\_\_\_

NUMBER OF PARTICIPANTS: \_\_\_\_\_

GENERAL IMPRESSIONS OF SERVICES: \_\_\_\_\_

\_\_\_\_\_

RECOMMENDATIONS FOR FOLLOW-UP: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

/

\_\_\_\_\_  
DATE

**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)  
Funded by the National Institute of Justice Grant Award #97-FS-VX-0005**

**C.I.S.D. TEAM ACTIVATION**

The Communications Specialist or Police Dispatcher will often be required to make contact with the Program Manager to initiate the request for Critical Incident Stress Debriefing (CISD) support. Therefore, the Communications Specialists or Police dispatcher should be aware of the CISD Program. The normal procedure would be to contact the program manager by calling L.E.A.F.S. Crisis Communications Center at 1-888-377-7703 or 1-888-377-7705 which would contact the program manager. The Center is maintained on a 24-hour basis. If the Program Manager cannot be reached within 10 minutes after a request is received, then the alternate or back-up coordinator shall be called. In the event neither the coordinator nor alternate can be contacted, the Clinical Advisor for the CISD Team shall be called.

Procedures and resource lists (updated) of CISD Team Members will be maintained at the Crisis Communications Center and L.E.A.F.S Program Office to ensure that an immediate response capability exists.

All Questions regarding CISD Team deployment and program protocols shall be directed to the Program Manager or his designee for the Law Enforcement and Family Assistance Program.

It is important that all activities be coordinated and dispatched in an orderly fashion regardless of the type of activity.

- All requests for CISD Team services shall be made directly to the Program Manager, or his designee who shall make an evaluation of the situation and initiate appropriate actions as indicated, consult with the Clinical Advisor on the nature of the incident and appropriate response actions.

CISD Team Members (law enforcement and a mental health professional) would then be contacted from the geographical area; East/Middle/West, Tennessee by the Program coordinator or his designees to respond. They would then meet at a predetermined site close to the incident location and then respond as a team.

Usually 3-5 Law Enforcement Team Members as well as a Mental Health Professional Team Member would respond to a debriefing.

The numbers of CISD Team responders can be added to depending on the incident or scope of number of personnel involved.

**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(LE.A.F.S.)**

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**DEFUSINGS**

Defusings are performed after the incident and after the unit or units have returned to the Department. The Purpose is to offer information and support, allow initial ventilation of feelings, to set up or establish a need for a formal debriefing, and to respond so they can go home or back in service. It is similar to a "mini debriefing" but is not as detailed or as long.

Guidelines for Defusing Services are as follows:

1. Defusings should be done immediately after the event. The ideal time frame is from 3-4 hours post incident to the end of the same day. If it is not possible to hold the defusing within these guidelines, a Formal Debriefing will have to be performed. The key is immediate intervention.
2. Defusings are a "group" process (as opposed to one-on-one) and all persons of the unit involved in the incident should attend the defusing.
3. Defusings should last approximately 45 minutes.
4. Peer Support Officers can perform Defusings, but PSO's should be well aware of his/her personal limitations and should call for support from a Mental Health Member or Senior Peer if the situation warrants. Peers directly involved with the operation should not perform defusings for this group.
5. Defusings should be held in a comfortable atmosphere, free from distractions and interference. All parties should remain in the Defusing until its conclusion.
6. The format for the Defusing shall be as follows:
  - A. Introduction - ask the group to tell you what happened
  - B. Ask the group - "What was the worst part?"
  - C. Allow freedom of discussion to take place on the "worst part". After the discussion subsides, offer information on possible signs and symptoms of stress they may or may not experience and information on what they can do about it. Give the Informational Handout to each one and make sure they know how to get in touch with the Program Coordinator, you, the Clinical Advisor, and other Team Members.

- D. Allow initial ventilation of feelings. Acknowledge the feelings, validate the feelings and move on. DO NOT probe or dwell. It is much too early after the critical incident for this tactic.
  
- E. Keep the session informal, but to the point. Do not allow the crew to lapse into a Critique of Operations. The Team Members primary function is to facilitate and direct the session.

**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
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**DEBRIEFINGS**

**DEFINITION:** "A critical incident is any event which is extraordinary and produces significant reaction in emergency personnel. The critical incident is so unusual that it overwhelms the usual normal abilities which emergency personnel have to cope with the situation." Jeffrey Mitchell, Ph.D.

- "Any situation beyond the realm of a persons usual experience that overwhelms his or her sense of vulnerability and or sense of control." Roger Solomon, Ph.D.
- The CISD process is designed to lesscn the overall impact of an event and to accelerate recovery in normal people who are having normal reactions to abnormal events.
- The CISD process is a structured discussion of an unusual event but it is **NOT A CRITIQUE OR PART OF AN INVESTIGATION.**
- No notes are allowed or recordings of what is said and only the responders who were involved in the actual event or personnel who have been impacted seriously are allowed to participate.
- Everything that is said in the debriefing is confidential. Nothing leaves the debriefing.
- Under Tennessee State Law, a Licensed Mental Health Professional, licensed in Tennessee must be present to insure privileged communication status.
- CISD is peer driven and clinically guided.
- The debriefing should take place 24 to 72 hours after the incident. The debriefing process is a seven-stage process:
  - Introduction Phase  
Introduction of responders and debriefers
  - Fact Phase  
What happened?
  - Thought Phase  
What were you thinking? What went through your mind?
  - Reaction Phase  
What did you do?
  - Symptom Phase  
What were you feeling? What are you feeling now?

- **Education Phase**  
Educating responders to some of the common signs and signals of critical incident stress reactions and providing handouts on things to try to mitigate such reactions and how to access support and assistance.
- **Reentry Phase**  
To summarize experience with emphasis on positive or learning aspects.

**CRITICAL INCIDENT STRESS SYMPTOMS ARE THE NORMAL REACTIONS OF NORMAL PEOPLE TO ABNORMAL EVENTS.**

**Timeframe of a typical CISD is two to three hours.**

**Critical Incident Stress Debriefing is *NOT THERAPY*.**

**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)  
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**ON-SCENE SUPPORT SERVICES**

Support services and interventions may be utilized during a critical incident. These may occur at or near the scene of operations. In most cases these services will be provided by Peer Support Officers or (PSO's), and Mental Health (MH) Team Members may be requested and required if the situation warrants.

On scene support will consist of the following types of services:

- I. One-on-one support to those officers showing obvious signs of distress as a result of the incident or their participation.
- II. Advice and counsel to incident commanders on topics of stress management specifically issues related to the critical incident.
- III. Control victims, survivors and families to insure the work of the law enforcement officer will not be impeded from interference by these persons until more appropriate agencies arrive.

**GENERAL INFORMATION AND GUIDELINES FOR ON SCENE ACTIVITIES**

**PSO ENGAGED AT THE SCENE**

Any Peer Support Member who is dispatched to a critical incident as a member of L.E.A.F.S. is primarily responsible for operating with that organization. For example, Peer Support Officers who accompany their units to the scene will serve in the capacity designated by their commander. This holds equally true for all law enforcement personnel involved at an incident.

While performing assigned duties, it may be possible for the Peer Support Officers to observe personnel for signs of obvious distress. While these are not the primary functions of these persons at this time, appropriate disclosure of their observations may provide insight to the command officers. If the need to make recommendations to command becomes obvious or if the PSO suspects that the potential is unusually high for the development of affect, the PSO may suggest to commander that he/she consider calling the L.E.A.F.S. CISD team. Even if the commander designates the PSO's function as Stress Management Program On Scene Support, the PSO shall request additional PSOs dispatched to the scene. The rationale for this action would be:

1. To Keep the Program Manager advised of the activity and insure continuity.
2. It may be inappropriate for the PSO to provide services to his own units.
3. It may prove to be too "draining" for the PSO who is or has been engaged in service to carry out the functions of On Scene Support activities.

4. It may not be in the emotional best interest of the PSO member to provide services in this situation.
5. The task may be too involved for one or two to handle effectively.
6. The PSO's unit may be disengaged before On Scene Support activities are completed.

#### PSO DISPATCHED TO THE SCENE

PSO Team Members dispatched to the incident scene by the Program Manager will rendezvous so they may go to the scene as a unit. Every attempt will be made to have the Team escorted to the scene by an Emergency Service Agency to permit easy access to the incident scene. If this is not possible, team members will take the minimum number of vehicles required to transport the team to the scene.

#### SCENE LEADERSHIP

Once on the scene, one member will act as the Team Leader (the senior PSO or MH member) and will report to the Command Post. This member will advise the commanding officer of the number of support personnel and will request direction from the officer. The Team Leader will act liaison between command and the team throughout the incident when possible. Therefore, any recommendations and observations of any team members should be made to the Team Leader, who will in turn report to the Commander. It will be ideal if team members can arrange "report times" to offer information to the Team Leader and so that the Team Leader will not be interrupting the command operation any more than necessary to make reports.

#### ADDITIONAL FIELD SERVICE PROTOCOLS

1. All L.E.A.F. Program Members acting on behalf of the program will wear L.E.A.F. Program ID at all times while on site, going to site, etc.
2. Team members will be appropriately dressed with protective clothing to be on site, including proper shoes/boots, protective gear, vests, etc.
3. No Team Member will go inside the internal perimeter unless requested to do so by the commanding officer.
4. The Team Leader will keep track and know where all team members are during the operation.
5. Except in extreme circumstances, Team Leader will be the liaison between command and the Team.
6. The Team Leader will assign tasks to team members as required.

7. All members will retain a "low profile".

## GUIDELINES FOR ON SCENE SUPPORT SERVICES AND INTERVENTIONS

### I. ONE-ON-ONE INTERVENTIONS

- A. One-on-one interventions will be provided **only** to those law enforcement personnel displaying **OBVIOUS** signs of distress and who are receptive to assistance. Signs of **OBVIOUS DISTRESS** include:
  1. Crying
  2. Shock-like state
  3. Unusual behavior (may include change in cognitive skills)
  4. Acting Out Behaviors (punching, screaming, kicking, etc.)
- B. The interventions will take place when the personnel are not actively engaged in service.
- C. The interventions will last 5 to 15 minutes in length.
- D. The interventions shall take place in a neutral atmosphere or in a position out of view, sight, or sound of operations when possible.
- E. Interventions will focus on the immediate (here and now) and will include the following a (as intervention guide):
  1. **ASK** - What is happening to the individual at that moment.
  2. **LISTEN AND REASSURE**- - that the feelings are normal (not abnormal) and dispel the "myth of uniqueness".
  3. **STATE** - Inform the law enforcement officer that the main objective is to return him/her to service as soon as possible. **BUT** that the decision will be made as soon as the worker is ready to make it.
  4. **ASK** - what is the worst part for them right now?
  5. **ASK** - What will help you right now? (Provide need if possible)
  6. **GOOD LISTENING** - display good attending skills, offer supportive comments.
- F. **NO "GROUP" INTERVENTIONS IN THE FIELD!!!!**

*NOTE: Interventions are successful if the actions are genuine, sincere, and the team member offers assistance in a confident manner. When in doubt as to what to say or how to say it, use the following suggestions:*

*Ask yourself the following:*

- 1. If I were in that persons position right now what could he said to me that would be the most helpful?*
- 2. If this were someone I loved and cared about, what would I want done for him or her right now?*

**G. Distressed individuals should show signs of improvement within 15 minutes of the intervention process.**

**H. It will be our procedure and our recommendation to the incident commander that all persons receiving one-on-one interventions are given an additional 15-30 minute rest period after the intervention is completed. During the rest period, the team member will allow the officer to "rest" and will not remain actively involved with the incident. While the team member will want to feel sure that the officer will not return to duty before he has had "breathing space". When placing an officer in a "rest state", the team member will tell the officer that he will be back to "check on him" in 15-20 minutes and request that the officer remain in position until his return. Upon rechecking the officer the team member should be able to determine and recommend with some assurance and confidence whether the officer should be returned to duty or an alternative.**

**I. Restoring an officer to service will depend upon how well he/she is functioning and/or feeling after intervention and rest period. Some considerations include:**

- 1. If an officer is very distressed and 15 minutes of one-on-one seem ineffectual, consideration for immediate removal should be given.**
- 2. If an officer is displaying psychotic behavior, immediate removal is indicated.**
- 3. If a distressed officer has calmed, but is still very distressed or again becomes distressed during the rest period, removal is most likely indicated.**
- 4. If a distressed officer is in any way injured removal to a hospital or medical area is indicated.**
- 5. If a distressed officer receives intervention, begins to improve and is given 15-30 minute rest period, and upon rechecking is determined able to return to service, the recommendation to command will be that the officer should assume lighter duty away from the most stressful assignments, and that he should not return to his/her previous function.**

6. Removal sites may include the most appropriate of: home, hospital, medical area, or new/lighter duty.

**NOTE:** It is generally a wise idea to have medical personnel assess the vital signs of distressed individuals and assess them for injuries.

## II. ADVICE AND COUNSEL TO COMMAND

Team members may offer advice and counsel to a command officer when appropriate, but have NO command authority. All decisions are the responsibility of the commanding officers. The Team will neither take nor assume any position of command or authority for incident management. As previously stated, the Team Leader shall act as the liaison between the overall incident commander and the Team Members whenever possible.

Some considerations for minimizing stress effects and maximizing performance may include:

### A. ROTATION OF STAFF

1. Two hours of duty then a 15 to 30 minute rest period will:
  - a. Decrease possibility of injury
  - b. Decrease fatigue
  - c. Decrease intense emotional drain

**NOTE:** If the officer is almost finished with a task, let him/her complete the task before changing their duty assignment,

2. When rotating officers, it is suggested that part of the old crew will be replaced with part of the new crew. This will permit the new crew to learn the task, Once this is accomplished, the rest of the new crew will replace the remaining members of the old crew.
3. If a distressed officer has calmed, but is still very distressed or again becomes distressed during the rest period, removal is most likely indicated
4. If a distressed officer is in any way injured, removal to a hospital or medical area is indicated.
5. If a distressed officer receives intervention, begins to improve and is given a 15-30 minute rest period, and upon rechecking is determined able to return to service, the recommendation to command will be that the provider should assume lighter duty away from the most stressful assignments, and that he should not return to his/her previous function.
6. Removal sites may include the most appropriate of: home, hospital, medical area, or new/lighter duty.

NOTE: It is generally a wise idea to have medical personnel assess the vital signs of distress individuals and assess them for injuries.

### III. ADVICE AND COUNSEL TO COMMAND

Team members may offer advice and counsel to a command officer when appropriate, but have NO command authority. All decisions are the responsibility of the commanding officers. The Team will neither take nor assume any position of command or authority for incident management. As previously stated, the Team Leader shall act as the liaison between the overall incident commander and the team Members whenever possible.

Some considerations for minimizing stress effects and maximizing performance may include:

#### A. ROTATION OF STAFF

1. Two hours of duty then a 15 to 30 minute rest period will
  - a. Decrease possibility of injury
  - b. Decrease fatigue
  - c. Decrease intense emotional drain

NOTE: If the officer is almost finished with a task, let him/her complete the task before changing their duty assignment.

2. When rotating officers, it is suggested that part of the old crew be replaced with part of the new crew. This will permit the new crew to learn the task. Once this is accomplished, the rest of the new crew will replace the remaining members of the old crew.
3. If it is not possible to give responders a rest period, rotate them to lighter duty. Crews should go from the intense duty to medium duty to light duty. Those at light duty should work their way up to the intense duty.
4. Four hours of duty without a break will cause extreme emotional and physical fatigue.
5. Maximum exposure should be no longer than 12 hours at the scene regardless of rest/rotation sequences. This is especially true if the possibility exists that the same personnel may have to resume duty at the scene the next day.
6. Command may need to alter normal procedures during lengthy operations. An example may be: during a lengthy operation of many hours or days. It may be necessary to allow workers to sleep at or near the scene during rest periods.
7. Caffeine products should not be offered to crews until after 4 hours of operation. Water and juices should be served throughout. No salt tablets should be offered since they may irritate the stomach. If Gatorade is used, dilute with 1/4 to 1/2 water to cut excessive sugar intake.

## B. FIELD OBSERVATIONS

1. The team members may at times have a better vantagepoint for observing the intricacies of the operations and the tasks. If a team member notices anything out of the ordinary, or anything that might present a situation of concern later, he/she should bring it to the attention of the Team Leader. Some examples would include:
  - a. Inappropriately dressed providers
  - b. Clothes not conducive to weather
  - c. Providers who arrived without protective gear and on duty
  - d. Need for water or rest breaks
  - e. Need for food
  - f. Need for toilet facilities
  - g. Need to establish demobilization
  - h. Need to establish a victim/survivor staging area
  - i. Need to call victim support organizations
  - j. Need to send someone with a provider being removed from scene
  - k. Need to remove provider from operations
  - l. Need to restore provider to lighter or alternative duty
  - m. Any substantial reason for providing insight to command when it can be determined that command is unaware of a potentially harmful situation.

## ASSISTING VICTIMS, SURVIVORS, FAMILIES

While assisting victims, survivors, and families is not the primary function of the Team, it may be necessary to provide interim support services to these individuals so that the emergency service crews may perform their duties without being hampered. The Team will maintain a listing of victim resources during on scene operations and will call these services if warranted and approved by command. The Team may initially need to provide a staging area for families to meet away from the operation site and out of the way of the emergency service workers. Once on the scene, management of these persons should be turned over to the appropriate victim support agency.

## LOCAL RESOURCES TO BE CONTACTED IN THE AREA ARE:

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(L.E.A.F.S.)  
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**DEMOBILIZATION SERVICES**

Demobilization services will be reserved for large scale, highly intense or unusual events that last a minimum of 8 hours. The objectives of a Demobilization are to:

1. Provide a place for disengaged (not returning to service) units to get rest, get something to eat and drink away from the site in a comfortable atmosphere before returning to quarters or home.
2. Provide information and support on possible stress related affects.
3. Provide a place for command officers to give closing remarks or incident updates.
4. Provide a resource for initial ventilation of feelings if necessary.

**GUIDELINES FOR DEMOBILIZATION SERVICES**

*MAKE SURE THE OFFICER RESPONDER WILL NOT BE RETURNING TO SERVICE BEFORE INITIATING DEMOBILIZATION SERVICES FOR THAT OFFICER.*

The Demobilization Center can be located in any large room where it is possible to carry out the above activities. Demobilization Services will be handled by several Mental Health Team Members and Peer Support Members not otherwise needed or engaged in incident activities.

The Process will be as follows:

1. Command will determine if a demobilization site shall be established
2. ALL disengaged units and personnel will be processed through the Demobilization Center
3. As the units leave the scene, they will stop at the center
4. Upon arrival at the center, a Team Member will meet each arriving unit or units and usher them to a corner of the room. Units will be kept together and the combining of different types of units will be discouraged.
5. The Demobilization lecture will take no longer than 15 minutes and will consist of the following information:
  - A. Recognition of workers efforts and fatigue
  - B. State as your objectives a desire to give the officers a chance to rest, eat, and "unwind" before going home or back to departments
  - C. If it is probable or possible that a formal debriefing will take place tell them how they will be informed as to its location, time, place, etc.
  - D. Inform the officers:

- Some of them may have no reaction to this event and that's good and not an abnormal reaction...
  - Some of them may have a delayed reaction and that's ok too...
  - Some of them may already be experiencing some uncomfortable feelings as a result of the event and this too is normal
  - Some of the most commonly reported reactions to events such as these are...(offer a brief list of signs and symptoms)
  - Give them the prepared "Demobilization Sheet" and refer to its content
  - If they want to stick around and ask questions or talk about anything, we'll be here, or you can call us later at the numbers on the sheet
  - Dismiss them to get something to eat and tell them their officers will be in soon to meet with them
6. One of the Mental Health Team Members will remain in reserve to meet with next incoming group
7. All Team Members should be giving the same information to all groups; therefore it will be necessary for the Demobilization Team to meet and develop an outline/script to insure continuity.

When unit officers arrive or before the units leave, the officers will/should do the following:

- Tell the officers that they did a good job
- Tell the officer/s what they are expected to do next Department S.O.P., reports, etc. then go home
- **ONLY** officers should report on illness, injury or death of any coworker and the progress and location of the officer. **TEAM MEMBERS DO NOT OFFER THIS INFORMATION, BUT WILL PROVIDE SUPPORT IF NECESSARY.** Remember you are not a member of their unit/family and it is not your place to inform them of any news. Your will be viewed in a "bad light" and, will not be able to offer support when it is needed.

**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
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**TEAM EXPOSURE LOG**

DATE:

LOCATION:

INCIDENT:

**ON SCENE SUPPORT TEAM MEMBERS:**

DEFUSING:

DEBRIEFING:

FOLLOW-UP SERVICES:

**EXAMPLE:** THE SAME EVALUATION FORMS WERE USED FOR EACH TYPE OF TRAINING, EACH SUBJECT AREA AND TRAINER. COVERSHEETS SUCH AS THIS, WERE CHANGED TO REFLECT CORRECT DATES, TRAINERS, ETC.

COPY

**CRITICAL INCIDENT  
STRESS DEBRIEFING  
TRAINING**

Sponsored by  
The Tennessee Sheriffs' Association, Inc.

Tennessee Law Enforcement Training Academy  
May 1-3, 1998

Presented by

**Law Enforcement and Family Support Project  
(L.E.A.F.S.)**

Day 2 - Jim Horn, Instructor

Funded by the National Institute of Justice Grant Award #97-FS-VX0005



3. Are there any topics which you would like to see added or would like to have more emphasis placed upon?

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4. What are some schools/programs you would like to see offered in the future?

*This would be an excellent  
specialized school at the  
Academy for Supervisors*

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5. What would be the best way to get information about the future schools to you?

- Mail to your home
- Teletype
- Mail to your training officer
- Other: \_\_\_\_\_

Please circle the number which most accurately describes your evaluation, using the following criteria:

1 = Poor    2 = Fair    3 = Good    4 = Excellent

1. How was the physical facility (seating, room size, work space, etc.)?

1      2      3      4

2. How well was the program run in terms of scheduling administration and creating a learning atmosphere?

1      2      3      4

3. How well did the subject matter fulfill the stated objective of the program?

1      2      3      4

4. Indicate how well each of the following contributed to the training. Cross out any that do not apply.

Group Participation

1      2      3      4

Visual Aids

1      2      3      4

Handouts

1      2      3      4

5. What is your overall evaluation of this training?

1      2      3      4

6. What was the most outstanding feature of this training?

Jim Harvey's  
instruction of the scenarios

7. What future changes, if any, would you recommend for this training?

\_\_\_\_\_  
\_\_\_\_\_

8. Additional comments you would like to make:

\_\_\_\_\_  
\_\_\_\_\_

9. How did you find out about this school?

\_\_\_\_\_ Institute of Professional Development (IPD) Booklet

\_\_\_\_\_ Training Officer

\_\_\_\_\_ Teletype

\_\_\_\_\_ IPD Flier

\_\_\_\_\_ Fellow Officer

\_\_\_\_\_ Other: \_\_\_\_\_

NAME OF INSTRUCTOR: Jim Horn

Please circle the number which most accurately describes your evaluation, using the following criteria:

1 = Poor    2 = Fair    3 = Good    4 = Excellent

- |   |   |   |   |   |
|---|---|---|---|---|
| 1. Did the instructor display a clear understanding of the content of the course?                                   | 1 | 2 | 3 | 4 |
| 2. Did the instructor have an effective style of presentation? (organized, clear, interesting, etc.)                | 1 | 2 | 3 | 4 |
| 3. Did the instructor support the value and viewpoints of others, even when different from those of the instructor. | 1 | 2 | 3 | 4 |
| 4. Did the instructor encourage you to explore this area of study beyond those elements that were assigned?         | 1 | 2 | 3 | 4 |
| 5. Was the instructor helpful when students encountered difficulties?   | 1 | 2 | 3 | 4 |
| 6. Did the instructor establish and maintain good relations with the class?   | 1 | 2 | 3 | 4 |
| 7. Was the instructor clear and thoughtful when answering questions?  | 1 | 2 | 3 | 4 |
| 8. Did the instructor help you to develop an understanding of the subject matter.                                   | 1 | 2 | 3 | 4 |
| 9. Did the instructor consistently begin and terminate classes on time.   | 1 | 2 | 3 | 4 |
| 10. Would you recommend this course to a friend!  | 1 | 2 | 3 | 4 |

Additional Comments. Please include comments on the best part of the class and the part of the class that needs improving.

Thank you

# Command Level Critical Incident Response Training



Sponsored by  
The Tennessee Sheriffs' Association, Inc.

Walters State Community College  
Tennessee Law Enforcement Training Academy  
University of TN, Jackson, TN

March 10, 1998  
March 11, 1998  
March 12, 1998

*Presented by*



**LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

**Funded by the National Institute of Justice Grant Award # 97-FS-VX0005**

# Law Enforcement

## Causes

## Costs & Solutions

It is a well-known fact that every sheriff could use more money in his or her budget, whether for equipment, training, or increased patrol and services. At the same time, there are costs for sick time, overtime coverage, accidents and injuries, and even legal costs to defend from a variety of lawsuits. Why would an article on law enforcement stress begin by pointing out such obvious information, which seems so unrelated to stress? The costs of stress to law enforcement agencies and communities include increased rates of sick time, increased accidents, increased use-of-force complaints, increased medical and disability leave, and decreased productivity on the part of deputies. In Los Angeles in one year, 63 percent of disability pensions were for stress or psychological disability.

Sheriffs and chiefs often ask what to do about the officer who started out as a model rookie—good community service, willing to go the extra mile, good attendance, productivity, and attitude—who is now one of the most vocal malcontents in the agency with a high rate of sick time utilization, marginally-acceptable production, bad attitude to the public and other officers, and even

complaints of possible excessive use of force. One of the first questions to be asked is, "Was this officer involved in a shooting or other similarly traumatic incident?" Almost without fail, the answer is, "Yes." Follow this up by asking, "Was this officer ever debriefed?" The most common answer to this second question is, unfortunately, "Ever what?" This situation, although it may appear extreme, is common and demonstrates some of the ways in which stress can increase departmental costs.

### The Role of the Recruit Academy

Most law enforcement agencies have a very thorough selection process, which ensures (as well as possible) that individuals selected for law enforcement positions are physically and emotionally healthy. Essentially normal individuals, with goals, aspirations, and a variety of friendships and support systems enter into academy training. Here, they begin the process of becoming a law enforcement officer. This includes not only the training that is required by POST regulations, but the beginning of the process of enculturation. Law enforcement is a subculture—it has its own norms, values, expectations, and jargon. In order to become a part of this subculture, the recruit must learn (and then be able to demonstrate) these things.

One of the most important skills in this subculture is the ability to assume and maintain control. It is clearly important for an officer to be able to assume and maintain control at the scene of an incident. But, this need to control an incident often extends to the belief that officers should not talk about (or show) any feelings related to an incident other than anger, or gallows-humor. Fear of recognition or vulnerability are frequently seen as signs of weakness—and "a weak officer can't be trusted when the chips are down." If an officer cannot be trusted, then he or she will ultimately be ostracized from the subculture. But, as law enforcement officers, our very lives may depend on our acceptance by and support from other officers, so the recruit is careful not to show anything that might be perceived as a sign of weakness.

Training in the practical aspects of the job, such as the use of force continuum, law, defensive driving, and even report writing all stress the importance of "doing it right." Law enforcement works in an area where lives are at risk, and a mistake can result in death or injury to members of the public, other officers, or the officer himself. Law enforcement officers have to make life or death decisions in a matter of seconds (knowing that these decisions will be second-guessed for hours, days, possibly even years). As a result, we stress repetition—the recruit practices over and over, until the action becomes second-nature. We tell recruits during many parts of the training, "Do things exactly the way we are teaching you, because it works." Often inferred from this instruction is the belief (maybe the hope) that if you do things the way you were taught, everything will work out right. By extension, we often feel if things didn't work out right, then we made a mistake, and mistakes are not acceptable—to us, our departments, or the public.

The rigors of academy training also begin to impact the recruit off the job. He or she

(continued from page 11)

media, and the public. Such incidents are (or should be) out of the realm of acceptable human experience, and therefore shouldn't happen. But, they do happen. If we think back to the academy training, the recruit was told that everything would work out right if he or she did things exactly the way they were trained. In a critical incident, something didn't work out right. Therefore, the first assumption (of the officer, other officers, and the public) is often that the involved officer did something wrong, and is to blame. The attempt to find and assign the blame causes further trauma to the officer. In effect, we "shoot our own wounded." If the incident itself wasn't enough to cause problems, the aftermath frequently is. It is very common for officers to feel abandoned by their agencies and coworkers after being involved in a shooting.

#### Solutions

The knowledge of how to diminish the impact of stress has been in place for a number of years, but has only recently been put into practice. Not surprisingly, education and training are perhaps the most important components of a comprehensive program of stress management. All officers should have an awareness of the need to recognize and deal with the emotions brought on by daily experiences on the job, with the reminder that these are normal emotions, experienced by normal individuals, in events that are not normal. Ideally, this training will take place initially in recruit academies, with periodic reinforcement through in-service training. In addition, field training officers should be especially aware of stress-related signs, and the resources available to officers.

When an officer has been involved in any critical incident, the most effective way of limiting the impact of that incident is through a Critical Incident Stress Debriefing (CISD). This is not to be confused with an operational debriefing, since its goal is not to determine what went wrong, nor is it part of the investigatory process. Rather, the goal of CISD is to assist the officer in understanding his or her actions and reactions, to decrease the negative impact of the incident, and promote shorter recovery to pre-incident functioning. When CISD is conducted by trained individuals in a timely manner (generally 24-72 hours after the incident), close to 90 percent of the officers have no long-term negative impact from the incident. This should be compared to research which indicates that 30 percent or more of officers involved in a critical incident who did not participate in a CISD may have noticeable, long-term problems and behaviors caused by the incident. Within five years of being involved in a shooting, approximately 70 percent of officers who were not debriefed have left the job, contrasted with only five percent of those who were debriefed. Shootings also impact officers who were not directly involved—one study showed that in small departments, 25 officers leave the job within five years for every officer who is involved in a shooting.

CISD provides a method for assisting the officer who has been involved in a critical incident. But, what about the officer who is developing problems simply from the chronic, cumulative stress of the job, often coupled with personal problems (divorce, separation, alcohol or other drug abuse)? CISD is not used when there has not been a critical incident. Just as experienced officers provide rookies with the assistance they need in adjusting to the job initially, experienced officers who have been specially trained can provide the support other officers need in dealing with stressful situations. Law enforcement stress programs began in the 1970s to respond to the high incidence of alcohol abuse and chemical dependence among law enforcement officers (three times that of the general public). In many cases there are problems in addition to



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the substance abuse, or problems that resulted in the abusive drinking or drug use as a means of coping. Many departments have found that peer support teams can respond to officers in need, and assist them.

#### Conclusion

The reality of stress in law enforcement is now well-known, and now rarely disputed. No officer wants to see another officer suffer needlessly, and we have all done our best to develop "street armor" that helps us to survive. More and more evidence indicates that there is a better way to protect ourselves and other officers than the old "armor", made up of denying feelings, depending on anger to cope with our vulnerability, and choir practice to deal with our fears and pain. Awareness training is the first step toward improving our ability to positively respond to the daily stresses of law enforcement. Providing CISD for officers involved in shootings and other traumatic or critical incidents responds to these high impact situations, while trained peer support can offer that little bit of assistance and backup that we all need from time to time. The benefits to the individual officer and his or her family are probably immeasurable in economic terms, while the benefits to the department in terms of decreased sick time, decreased on-duty accidents, improved productivity and morale, and fewer citizen complaints are measurable and demonstrable on the bottom line—our departments' operating budgets.

Russell J. Bonanno, M.Ed. is director of psychological services, and Peter J. Cove, CEAP, is the president of Law Enforcement Assistance Programs, Inc. Both have over 20 years of experience in law enforcement and public safety. ○



**CRITICAL INCIDENT STRESS INFORMATION SHEET**

You have experienced a traumatic event, or critical incident (*any incident that causes emergency services personnel to experience unusually strong emotional reactions which have the potential to interfere with their ability to function either at the scene or later*). Even though the event may be over, you may now be experiencing, or may experience later, some strong emotional or physical reactions. It is very common, in fact quite normal for people to experience aftershocks when they have passed through a horrible event.

Sometimes the emotional aftershocks (or stress reactions) appear immediately after the traumatic event. Sometimes they may appear a few hours or a few days later. And, in some cases weeks or months (or even years) may pass before the stress reactions appear.

The signs and symptoms of a stress reaction may last a few days, a few weeks, or a few months and occasionally longer, depending on the severity of the traumatic event's impact on you. With understanding and support of loved ones, the stress reactions usually pass more quickly. Occasionally the traumatic event is so painful that professional assistance from a counselor may be necessary. This does not imply craziness or weakness. It simply indicates that the particular event was just too powerful for the person to manage by themselves.

*Critical incident stress symptoms are the normal reactions of normal people to abnormal events.*

**Here are some common signs and signals of a critical incident stress reaction:**

<b>PHYSICAL</b>	<b>COGNITIVE</b>	<b>EMOTIONAL</b>	<b>BEHAVIORAL</b>
<ul style="list-style-type: none"> <li>&gt; fatigue</li> <li>&gt; nausea</li> <li>&gt; muscle tremors</li> <li>&gt; twitches</li> <li>&gt; chest pain*</li> <li>&gt; difficulty breathing*</li> <li>&gt; elevated BP</li> <li>&gt; rapid heart rate</li> <li>&gt; thirst</li> <li>&gt; headaches</li> <li>&gt; visual difficulties</li> <li>&gt; vomiting</li> <li>&gt; grinding of teeth</li> <li>&gt; weakness</li> <li>&gt; dizziness</li> <li>&gt; profuse sweating</li> <li>&gt; chills</li> <li>&gt; shock symptoms*</li> <li>&gt; fainting</li> </ul>	<ul style="list-style-type: none"> <li>&gt; blaming someone</li> <li>&gt; confusion</li> <li>&gt; poor attention</li> <li>&gt; poor decisions</li> <li>&gt; heightened or lowered alertness</li> <li>&gt; poor concentration</li> <li>&gt; memory problems</li> <li>&gt; hyper vigilance</li> <li>&gt; difficulty identifying familiar objects or people</li> <li>&gt; increased or decreased awareness of surroundings</li> <li>&gt; poor problem solving</li> <li>&gt; poor abstract thinking</li> <li>&gt; loss of time, person, or place</li> <li>&gt; disturbed thinking</li> <li>&gt; nightmares</li> <li>&gt; intrusive images</li> </ul>	<ul style="list-style-type: none"> <li>&gt; anxiety</li> <li>&gt; guilt</li> <li>&gt; grief</li> <li>&gt; denial</li> <li>&gt; severe panic (rare)</li> <li>&gt; emotional shock</li> <li>&gt; fear</li> <li>&gt; uncertainty</li> <li>&gt; loss of emotional control</li> <li>&gt; depression</li> <li>&gt; inappropriate emotional response</li> <li>&gt; apprehension</li> <li>&gt; feeling overwhelmed</li> <li>&gt; intense anger</li> <li>&gt; irritability</li> <li>&gt; agitation</li> </ul>	<ul style="list-style-type: none"> <li>&gt; change in activity</li> <li>&gt; change in speech patterns</li> <li>&gt; withdrawal</li> <li>&gt; emotional outbursts</li> <li>&gt; suspiciousness</li> <li>&gt; change in usual communications</li> <li>&gt; change in appetite</li> <li>&gt; alcohol consumption</li> <li>&gt; inability to rest</li> <li>&gt; antisocial acts</li> <li>&gt; nonspecific bodily complaints</li> <li>&gt; hyper alert to environment</li> <li>&gt; startle reflex intensified</li> <li>&gt; pacing</li> <li>&gt; erratic movements</li> <li>&gt; change in sexual interest or functioning</li> </ul>
<p>* Get emergency medical evaluation</p>			

(See Other Side for Things to Do)

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## **CRITICAL INCIDENT STRESS INFORMATION SHEET FOR SIGNIFICANT OTHERS**

Your loved one has been involved in an emotion-charged event, often known as a critical incident. S/He may be experiencing normal stress responses to such an event (critical incident stress). Critical incident stress affects up to 87% of all emergency personnel exposed to a critical incident. No one in emergency services is immune from critical incident stress regardless of past experiences or years of service. Your loved one may experience critical incident stress at any time during his/her career.

### **IMPORTANT THINGS TO REMEMBER ABOUT CRITICAL INCIDENT STRESS:**

- The signs of critical incident stress are physical, cognitive, emotional, and behavioral. Your loved one has received a handout outlining these signs. Please ask him or her to share it with you.
- Critical incident stress response can occur right at the scene, within hours, within days, or even within weeks (or longer after the incident).
- Your loved one may experience a variety of signs or symptoms of a stress response, or s/he may not feel any of the signs at this time.
- Suffering from the effects of critical incident stress is completely normal. Your loved one is not the only one suffering: other emergency personnel shared the event and are probably sharing the reaction.
- The symptoms will normally subside and disappear in time, if you or your loved one do not dwell upon them.
- All phases of our lives overlap and influence each other: personal, professional, family, etc.. The impact of critical incident stress can be intensified, influenced, or mitigated by our own personal, family, and current developmental issues.
- Encourage, but do NOT pressure, your loved one to talk about the incident and his or her reaction to it. Talk is the best medicine. Your primary "job" is to listen and reassure. Remember that even if the event is upsetting to you and your loved one, your children may be affected, also. They may need to talk too!
- You may not understand what your loved one is going through at this time, but offer your love and support. Don't be afraid to ask what you can do that s/he would consider helpful.
- Accept the fact that life will go on for you, your loved one, and your children. Maintain -- or return to -- a normal routine as soon as possible.
- If the signs of stress that your loved one is experiencing do not begin to subside within a few weeks, or if they intensify, consider seeking further assistance. The Critical Incident Stress Debriefing Team can help you and your loved one find a professional who understands critical incident stress, and how it can affect you.

**Feel free to contact L.E.A.F.S. at (615) 884-1259 or (615) 885-7511 for assistance, or to provide information for you or your loved ones.**

This handout was developed by David Flannery, Program Director, Concord/Carlisle CISD Team  
2815 Patriot Way, Nashville, TN 37214-3541 — FAX (615) 885-5785

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## Critical Incident Stress Management for Law Enforcement

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As with any aspect of law enforcement, Critical Incident Stress Management involves training and activities that are preventative (proactive), and activities that are in response to certain situations (reactive). In addition, departmental policies and procedures addressing all of these activities become a central part of the entire CISM program.

### PROACTIVE:

#### TRAINING

A certain amount of stress-related training is appropriate for all officers. This training, often called *inoculation training* can be included, as part of new recruit training, and/or incorporated into regular in-service training for working officers. The purpose of this training is to provide all officers with a basic understanding of what stress is, how to recognize the signs of stress, and what resources are available (personal, departmental, and outside) to assist the officer in dealing with stress. It would also include a review of departmental policies and procedures related to CISM.

Additional specialized training is provided to members of a Debriefing Team and a Peer Support Team. It is also not unusual to provide additional training for supervisors and command staff, to help them recognize ways in which they might respond to incidents involving stressful situations, or officers suffering from stress, that will serve to protect the agency and assist the officer and themselves.

#### POLICIES AND PROCEDURES

Law enforcement has policies and procedures addressing many (if not most) aspects of the job, from the most mundane and daily operating procedures, to procedures for major disturbances that we all hope won't happen. Without these procedures, we know our responses would suffer from lack of consistency, extended response time, or confusion. CISM is no different. Policies and procedures regarding training, responses of the agency and the Debriefing Team or Peer Support Team (when present), policies that protect individual officers (especially policies related to confidentiality) are all necessary to ensure that we provide the most effective response available.

### REACTIVE:

Law enforcement officers have all heard of the *Force Continuum* at some point in their training. In CISM, we have *Response Continuum* for the same reasons. In an ideal situation, we would have all levels of the continuum available to us at all times. But, the reality is that sometimes certain levels of response are not available. Some officers work without immediate access to certain pieces of equipment due to assignment, rank, or location. Some agencies may not have a CISD or Peer Support Team immediately available. We still owe it to ourselves to be aware of all the options that could be utilized.

#### FORMAL PEER SUPPORT

Officers who have been specially trained can provide peer support to other officers for stressful situations. Examples might include family problems (including marital problems), issues with alcohol use, job-related incidents problems with coworkers, and follow-up after recognized critical incidents. This response could be initiated by the officer, a partner, the trained peer, a family member, or a supervisor.

#### DEFUSING

Members of an established Peer Support Team or Debriefing Team, meet with officers involved in certain incidents within hours of the incident. There are formal guidelines for the content of this meeting; it may involve a group of officers involved in an incident, and may be the only response necessary. It may also precede a formal debriefing. A defusing is typically initiated as part of department policy and procedure, but may also be requested by an officer involved in an incident, or a supervisor.

#### ON-SCENE SUPPORT

This response is not often utilized in law enforcement, because it assumes that the incident will continue over an extended period of time, typically several hours or more.

#### DEBRIEFING

A formal debriefing requires the involvement of a specially trained Debriefing Team. Debriefings are structured discussions that are scheduled in advance, usually to be conducted 48 to 72 hours or more after the incident has reached conclusion. A debriefing may be preceded by a defusing, or on-scene support, but does not require that either have occurred. It is often automatically scheduled as a result of certain incidents, as covered in department policies and procedures, and participation by officers involved in the incident may be mandatory in some cases.

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## Law Enforcement and Family Support - Tennessee Project

### Evaluation of Command Level Critical Incident Response Training March 10, 11, & 12, 1998

Subject		Strongly Agree	Agree	Disagree	Strongly Disagree	% Strongly Agree
Worthwhile Experience	East	20	4		1	
	Middle	31	4			
	West	29	2			
						88%
Speaker Knew Subject	East	18	6	1		
	Middle	34	1			
	West	28	3			
						88%
Program Well Organized	East	16	9			
	Middle	31	4			
	West	24	6			
						79%
Questions Welcomed	East	17	8			
	Middle	32	5			
	West	23	6			
						79%
Recommend Program	East	18	5	1		
	Middle	30	5			
	West	29	2			
						86%
Handouts Helpful	East	14	10	1		
	Middle	26	9			
	West	24	6			
						71%
Overall Evaluation		<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	
	East	23	1	1		
	Middle	32	2	1		
	West	28	3			
						91%

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This project was supported by Grant No. 97-F5-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.



PROGRAM EVALUATION  
COMMENTS

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Overall, I found this program to be a worthwhile experience.

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Needed for a long time.

This is a very needed program

A very important program and a commendable effort by TSA.

If there was ever a group of men and women that cared about another person, would be these people. That is what it takes.

This program has truly helped me. I have been able to cope with a lot of problems I was experiencing.

Very much so.

ulated thought and ideas.

This is what saved my life and this is what law enforcement has needed for years.

Anyone that has been involved in a C. I. should hear this and be involved.

Program deals with sensitive issues that need to be explored.

I believe this is and will be a very worthwhile program.

Will provide me a better way of dealing with daily management tasks.

Long overdue.

Necessary and beneficial for everyone.

This is a program that has been needed for too long. I'm glad to see it has come about.

A day like no other. Well Spent. Thanks

Unaware that this program existed.

This program has been needed for years.

Of the best schools I've ever attended.

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This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.

I came in with a bad attitude, but after dismissing preconceived notions and listening, I have realized that this is for my fellow officers (my cop family) and want to participate.

of the best I have heard.

Much needed.

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The speaker(s) knew the subject and was (were) well prepared.

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Very knowledgeable

Excellent

Continue the team instruction method.

Strongly motivated in subject.

Kept everyone interested.

Knew the point they wanted to get across and did not bore with unnecessary B.S.

Very good

Kept my attention very well.

High credibility and honesty.

Excellent speaker.

As good as I have heard.

Very good program

He was very helpful to understand all this.

Peter Cove is excellent.

Obviously.

Impressive

Very articulate and knew what he was talking about.

They have been there and done that.

Peter Cove - The best in the business.

Seemed knowledgeable

Both speakers were not only well prepared but they have been there on C.I. themselves so they can relate even better.

They have been there.

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The program was well organized.

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Tops - well planned!

Yes

Interesting statistics that helped to drive home the seriousness of traumatic experiences on person's health.

Peter knew who, what, when, and where. Nothing seemed to be left out.

Good pace. Good audience contact.

It was seen throughout the class.

Lots of structure.

Greatly organized.

Needs to have more classes for other officers.

Ran very smooth.

Well done.

Needed coffee.

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My questions were welcomed, and answered appropriately.

---

---

( 1 group participation.

Kept mouth shut and learned.

Participants are among caring friends.

Always!

Absolutely.

Had good answers for any questions.

I had no questions, but felt free to ask if I had to.

Questions were answered politely and to the point.

I had no questions because I was so amazed at what I was learning.

Great!

Every question was answered.

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I would recommend this program to my friends and co-workers.

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( Council Members/Advisory Boards

Yes

Yes

All police officers should attend.

As time and opportunity allows.

To let them know there is help and they are normal.

I want to come back and would urge anybody in law enforcement to attend.

Especially for mental health professionals.

This would open some eyes in our department.

I feel like every member of every department should make this part of in-service training.

Yes, absolutely.

For sure

Every department should be involved.

More awareness training on stress needed for all police.

It works.

I needed help and received it and have taken one of my fellow employees with me.

This program is very good for officers involved. It is truly needed.

I had to use this program in August, 1997 due to my brother being shot and killed. He was a Covington, TN police officer. If it was not for this program, Peter Cove and Paul Jennings, I don't know what I would have done.

Will send co-workers.

Everyone needs this program.

Absolutely.

Glad to see that West TN will be involved in a State program.

Definitely. Twenty years ago I was involved and still haven't talked with anyone about it. Think I finally found a way.

Every department command staff should go to this.

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I feel the handouts were helpful.

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Would like more written material with check lists. Standard police for departments.

More handouts are needed to demonstrate commands needed to help the line officer.

Very helpful and the more, the better.

Well put together.

Would like to have handouts of the overheads.

A suggested departmental policy would be most helpful.

Yes. Thank you.

Would have liked to have had more handouts.

With these handouts I can read all of them and possibly help a dear friend and partner.

Could have given more.

Yes. Wish I had more.

Yes

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---

What changes would you suggest to make this program better

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Passing out the handouts first so the students can follow along and make notes on the handouts.

None. Good program, excellent ideas.

Would not change anything

Put it up. Sounds good.

Need more departments to show up and participate.

More frequent; but shorter breaks.

None. Video was good.

All law enforcement personnel should attend a seminar such as this.

Show more videos

Teach more of it.

It was great

I can't think of any.

Make more sessions available to others.

Most statistics were dated mid 1980's and should be updated. Expect program to be a tremendous resource.

More time for Peter to teach the program.

Give the basic facts of the grant and what our levels of involvement are first; then show films and program.

This is information an officer should receive in basic or yearly in-service training.

Just keep up the good work.

Breaks every 45 to 50 minutes.

e noticed or needed. Good format and presentation. Part where individuals share personal experiences was very good.

Address everyday incidents in law enforcement that build into critical conditions.

Do not use the word routine regarding police work.

Coffee and snacks.

Longer

More handout information.

Give the officers some good ideas on how to live past 59.

No changes, but need to get more chiefs and sheriffs involved.

Make it mandatory for chiefs, sheriffs and administrators.

Smaller groups to encourage interaction.



PROGRAM EVALUATION

Program Date: March 10, 1998 Location: Walters State Comm. College, Morristown, TN  
Program Title: Command Level Critical Incident Response Training  
Program Sponsor: Tennessee Sheriffs' Association, Inc.

It has been a pleasure having you in this program. We strive to maintain the highest Standards in our training programs, and value your evaluation and comments.

Instruction: For each item, please circle the choice which most accurately reflects your evaluation of the speakers, and the presentation. Feel free to add your comments on either side of this form.

SA=Strongly Agree

A=Agree D=Disagree

SD=Strongly Disagree

---

---

Overall, I found this program to be a worthwhile experience.

---

---

SA - 20

A - 4

-

SD - 1

Needed for a long time.

This is a very needed program

A very important program and a commendable effort by TSA.

---

---

The speaker(s) knew the subject and was (were) well prepared.

---

---

SA - 18

A - 6

D - 1

SD -

Very knowledgeable

Excellent

2815 Patriot Way • Nashville, TN 37214-3541 • Tel: 615-884-1259 • Fax: 615-885-5785

This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.

---

---

The program was well organized.

---

---

SA - 16  
A - 9  
D -  
SD -

---

---

My questions were welcomed, and answered appropriately.

---

---

SA - 17  
A - 8  
D -  
SD -

Good group participation.

---

---

I would recommend this program to my friends and co-workers.

---

---

SA - 18  
A - 5  
D - 1  
SD -

For sure

Every department should be involved.

More awareness training on stress needed for all police.

---

---

I feel the handouts were helpful.

---

---

SA - 14  
A - 10  
D - 1  
SD -

---

---

What changes would you suggest to make this program better

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---

Passing out the handouts first so the students can follow along and make notes on the handouts.

None. . Good program, excellent ideas.

Would not change anything

Keep it up. Sounds good.

Need more departments to show up and participate.

More frequent; but shorter breaks.

None. Video was good.

---

---

What is your overall evaluation of this program?

---

---

Excellent            23

Good                    1

Fair                    1

Poor

All law enforcement personnel should attend a seminar such as this.



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor



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What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*PASSING OUT THE HANDOUTS FIRST SO THE STUDENTS CAN FOLLOW ALONG AND MAKE NOTES ON THE HANDOUTS*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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I feel the handouts were helpful. Comments:	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

*KEEP it up Sound Good.*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	(A)	D	SD
I feel the handouts were helpful. Comments:	SA	(A)	D	SD

What changes would you suggest to make this program better?

*NONE*

What is your overall evaluation of this program?

(Excellent)      Good      Fair      Poor



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My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*N/A*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent   
  Good   
  Fair   
  Poor



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Overall, I found this program to be a worthwhile experience. Comments: <i>NEEDED FOR A LONG TIME.</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>VERY KNOWLEDGEABLE</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments: <i>FOR SURE</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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What changes would you suggest to make this program better?

What is your overall evaluation of this program?

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Good

Fair

Poor



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I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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Overall, I found this program to be a worthwhile experience. Comments: <i>This is a very needed program.</i>	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Excellent</i>	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments: <i>Good group participation</i>	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>Every department should be involved</i>	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*Need more departments to show up and participate.*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*None, Good Program. Excellent ideas*

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: THIS IS SOMETHING THAT HAS BEEN NEED FOR A LONG TIME	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: VERY WELL PRESENTED	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	(SA)	A	D	SD
I feel the handouts were helpful. Comments:	(SA)	A	D	SD

What changes would you suggest to make this program better?

WOULD NOT CHANGE ANYTHING.

What is your overall evaluation of this program?

(Excellent)

Good

Fair

Poor



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Overall, I found this program to be a worthwhile experience. Comments: A very important program, and a commendable effort by TSA	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments: More awareness training on stress needed for all police	(SA)	A	D	SD
I feel the handouts were helpful. Comments: More handouts of covered material would be helpful.	(SA)	A	D	SD

What changes would you suggest to make this program better?

More frequent, but shorter, breaks.

What is your overall evaluation of this program?

(Excellent)      Good      Fair      Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor

ALL Law Enforcement Management Persons should attend a seminar such as this!



## PROGRAM EVALUATION

**Program Date:** March 10, 1998      **Location:** Walters State Comm. College, Morristown, TN  
**Program Title:** Command Level Critical Incident Response Training  
**Program Sponsor:** Tennessee Sheriffs' Association, Inc.

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Overall, I found this program to be a worthwhile experience. Comments:	SA	<del>A</del>	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent                  Good                  Fair                  Poor



## PROGRAM EVALUATION

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The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

NONE, Video was good

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	(A)	D	SD
The program was well organized. Comments:	SA	(A)	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	(A)	D	SD
I feel the handouts were helpful. Comments:	SA	(A)	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

(Good)

Fair

Poor



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Overall, I found this program to be a worthwhile experience. Comments:	SA	(A)	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	(A)	D	SD
The program was well organized. Comments:	SA	(A)	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	(A)	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	(A)	D	SD
I feel the handouts were helpful. Comments:	SA	(A)	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



PROGRAM EVALUATION

Program Date: March 12, 1998 Location: U.T. Center for Agricultural Research, Jackson  
Program Title: Command Level Critical Incident Response Training  
Program Sponsor: Tennessee Sheriffs' Association, Inc.

It has been a pleasure having you in this program. We strive to maintain the highest Standards in our training programs, and value your evaluation and comments.

Instruction: For each item, please circle the choice which most accurately reflects your evaluation of the speakers, and the presentation. Feel free to add your comments on either side of this form.

SA=Strongly Agree

A=Agree D=Disagree

SD=Strongly Disagree

---

---

Overall, I found this program to be a worthwhile experience.

---

---

SA - 29  
A - 2  
D -  
SD -

If there was ever a group of men and women that cared about another person, would be these people. That is what it takes.

This program has truly helped me. I have been able to cope with a lot of problems I was experiencing.

Very much so.

Stimulated thought and ideas.

This is what saved my life and this is what law enforcement has needed for years.

Anyone that has been involved in a C. I. should hear this and be involved.

Program deals with sensitive issues that need to be explored.

I believe this is and will be a very worthwhile program.

Will provide me a better way of dealing with daily management tasks.

g overdue.

Necessary and beneficial for everyone.

2815 Patriot Way • Nashville, TN 37214-3541 • Tel: 615-884-1259 • Fax: 615-885-5785

This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.

This is a program that has been needed for too long. I'm glad to see it has come about.

---

---

The speaker(s) knew the subject and was (were) well prepared.

---

---

SA - 28  
A - 3  
D -  
SD -

Very good program

He was very helpful to understand all this.

Peter Cove is excellent.

iously.

Impressive

Very articulate and knew what he was talking about.

They have been there and done that.

Peter Cove - The best in the business.

Seemed knowledgeable

Both speakers were not only well prepared but they have been there on C.I. themselves so they can relate even better.

They have been there.

---

---

The program was well organized.

---

---

SA - 24  
A - 6  
D - 1  
SD -

...ds to have more classes for other officers.

Ran very smooth.

Well done.

Needed coffee.

---

---

My questions were welcomed, and answered appropriately.

---

---

SA - 23

A - 6

D -

SD -

Did not mark answer - 2

Kept mouth shut and learned.

Participants are among caring friends.

---

---

I would recommend this program to my friends and co-workers.

---

---

SA - 29

A - 2

D -

SD -

It works.

I needed help and received it and have taken one of my fellow employees with me.

This program is very good for officers involved. It is truly needed.

I had to use this program in August, 1997 due to my brother being shot and killed. He was a Covington, TN police officer. If it was not for this program, Peter Cove and Paul Jennings, I don't know what I would have done.

Will send co-workers.

Everyone needs this program.

Absolutely.

And to see that West TN will be involved in a State program.

Definitely. Twenty years ago I was involved and still haven't talked with anyone about it. Think I finally found a way.

Every department command staff should go to this.

---

---

I feel the handouts were helpful.

---

---

SA - 24  
A - 6  
D - 1  
SD -

Would like more written material with check lists. Standard police for departments.

More handouts are needed to demonstrate commands needed to help the line officer.

Very helpful and the more, the better.

Well put together.

Would like to have handouts of the overheads.

A suggested departmental policy would be most helpful.

---

---

What changes would you suggest to make this program better

---

---

Just keep up the good work.

Breaks every 45 to 50 minutes.

None noticed or needed. Good format and presentation. Part where individuals share personal experiences was very good.

Address everyday incidents in law enforcement that build into critical conditions.

Do not use the word routine regarding police work.

Coffee and snacks.

Longer

More handout information.

Give the officers some good ideas on how to live past 59.

No changes, but need to get more chiefs and sheriffs involved.

Make it mandatory for chiefs, sheriffs and administrators.

Smaller groups to encourage interaction.

---

---

What is your overall evaluation of this program?

---

---

Excellent            28

Good                 3

Fair



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Peter Cove is excellent</i>	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>Every Department Command Staff should go to this.</i>	SA	A	D	SD
I feel the handouts were helpful. Comments: <i>A suggested departmental policy would be most helpful</i>	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>Stimulated thought and ideas</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Seemed knowledgeable</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments: <i>needed coffee</i>	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments: <i>kept mouth shut as learned</i>	<input type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments: <i>Cops need to learn how to help each other -</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments: <i>would like to have had handouts of the audiotapes.</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

*encourage interaction*

*smaller groups - to*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>This is what saved my life, and this is what L.E. has needed for years</i>	<input checked="" type="radio"/> SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Peter Cove - the best in the business!</i>	<input checked="" type="radio"/> SA	A	D	SD
The program was well organized. Comments: <i>Very well done!</i>	<input checked="" type="radio"/> SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments: <i>Participants are among caring friends!</i>	<input checked="" type="radio"/> SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>IT Works</i>	<input checked="" type="radio"/> SA	A	D	SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	A	D	SD

What changes would you suggest to make this program better?

*Make it mandatory for chiefs, sheriffs + administrators*

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor

*LT M. Se*      *Union City P.D.*



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>If there was ever a group of men women that care about another person, would be these people. That is what it takes.</i>	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>They have been there!</i>	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>I needed help and received it and have taken one of my fellow employees with me.</i>	(SA)	A	D	SD
I feel the handouts were helpful. Comments:	(SA)	A	D	SD

What changes would you suggest to make this program better?

*No Changes, But we get more chiefs or Sheriffs involved!*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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Overall, I found this program to be a worthwhile experience. Comments: <i>This program has truly helped me I have been able to cope with a lot of problems I was experiencing</i>	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>This program is very good for officers involved. It is truly needed.</i>	(SA)	A	D	SD
I feel the handouts were helpful. Comments:	(SA)	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

(Excellent)      Good      Fair      Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: both speakers were not only well prepared & they have been there on C.I. themselves so they can relate even better	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments: I had to use this program August 1997 due to my brother being shot & killed he was a Canton TN Police Officer. If it was not for this program, Peter Cove & Paul Jennings. I don't know what I would have done.	(SA)	A	D	SD
I feel the handouts were helpful. Comments:	(SA)	A	D	SD

What changes would you suggest to make this program better?

Give the officers some good Ideas on how to Live post 59-

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>Very much so.</i>	<input checked="" type="radio"/> SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	A	D	SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>Will send co-workers</i>	<input checked="" type="radio"/> SA	A	D	SD
I feel the handouts were helpful. Comments: <i>Well put together</i>	<input checked="" type="radio"/> SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor



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Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>He was very helpful to understand all this</i>	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments: <i>Needs to have more classes for other officers</i>	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments: <i>Everyone needs this program</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments: <i>Very helpful &amp; the more the better</i>	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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SA=Strongly Agree      A=Agree      D=Disagree      SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>THIS IS A PROGRAM THAT HAS BEEN NEEDED FOR TOO LONG. I'M GLAD TO SEE IT HAS COME ABOUT</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input type="radio"/> SA	<input checked="" type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments: <i>ABSOLUTELY</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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The speaker(s) knew the subject and was (were) well prepared. Comments:	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments: GLAD TO SEE THAT WEST TENNESSEE WILL be INVOLVED IN A STATE PROGRAM.	(SA)	A	D	SD
I feel the handouts were helpful. Comments: more handouts are needed to demonstrate Command's need to help the line officer.	SA	(A)	D	SD

What changes would you suggest to make this program better?

more handout information.

What is your overall evaluation of this program?

(Excellent)      Good      Fair      Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>any one that has been involved in a CI should hear this and be involved.</i>	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>They have been there and done that!</i>	SA	A	D	SD
The program was well organized. Comments: <i>Ran very smooth</i>	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments: <i>Definitely - 20 years ago I was involved and still haven't talked w/ anyone about it. Think I've finally found a way.</i>	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*Longer*

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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Instructions: For each item, please circle the choice which most accurately reflects your evaluation of the speakers, and the presentation. Feel free to add your comments on either side of this form.

SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>Program deals with sensitive issues that need to be explored.</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments: <i>Would like more written material with checklists - standard policy for depts.</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better? *Coffee + snacks*

What is your overall evaluation of this program?

Excellent     Good     Fair     Poor



## PROGRAM EVALUATION

**Program Date:** March 12, 1998      **Location:** U.T. Center for Agricultural Research, Jackson  
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**Program Sponsor:** Tennessee Sheriffs' Association, Inc.

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Instructions: For each item, please circle the choice which most accurately reflects your evaluation of the speakers, and the presentation. Feel free to add your comments on either side of this form.

SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: I believe This is & will be a very worthwhile program	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments: very articulate & knew what is was talking about	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better? *Just, keep up the good work!*

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>necessary and beneficial for everyone</i>	<input checked="" type="radio"/> SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>obviously</i>	<input checked="" type="radio"/> SA	A	D	SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	A	D	SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments: <i>Long overdue</i>	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Impressive</i>	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
<i>Will provide me a better way of dealing with daily management tasks.</i>				
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*None*

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA X	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA X	A	D	SD
The program was well organized. Comments:	SA X	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA X	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA X	A	D	SD
I feel the handouts were helpful. Comments:	SA X	A	D	SD

What changes would you suggest to make this program better?

*Do not use the word - Routine - regarding - Police work*

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

Address EVERYDAY incidents in Law enforcement that build into critical conditions -

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

none noticed or needed - good format & presentation. Part where individuals share personal experiences was very good.

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments: <i>Very Good Program</i>	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	<del>SA</del>	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<del>SA</del>	A	D	SD
The program was well organized. Comments:	<del>SA</del>	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	<del>SA</del>	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	<del>SA</del>	A	D	SD
I feel the handouts were helpful. Comments:	<del>SA</del>	A	D	SD

What changes would you suggest to make this program better?

NOT A THING

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
The program was well organized. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
My questions were welcomed, and answered appropriately. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I would recommend this program to my friends and co-workers. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD
I feel the handouts were helpful. Comments:	<input checked="" type="radio"/> SA	<input type="radio"/> A	<input type="radio"/> D	<input type="radio"/> SD

What changes would you suggest to make this program better? *None*

What is your overall evaluation of this program?

Excellent       Good       Fair       Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent

Good

Fair

Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	(SA)	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	(SA)	A	D	SD
The program was well organized. Comments:	(SA)	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	(SA)	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	(SA)	A	D	SD
I feel the handouts were helpful. Comments:	(SA)	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

(Excellent)      Good      Fair      Poor



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The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent     
  Good     
  Fair     
  Poor



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SA=Strongly Agree    A=Agree    D=Disagree    SD=Strongly Disagree

Overall, I found this program to be a worthwhile experience. Comments:	SA	(A)	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	(A)	D	SD
The program was well organized. Comments:	SA	(A)	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	(A)	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	(A)	D	SD
I feel the handouts were helpful. Comments:	SA	(A)	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent      (Good)      Fair      Poor



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The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor



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Overall, I found this program to be a worthwhile experience. Comments:	SA	A	D	SD
The speaker(s) knew the subject and was (were) well prepared. Comments:	SA	A	D	SD
The program was well organized. Comments:	SA	A	D	SD
My questions were welcomed, and answered appropriately. Comments:	SA	A	D	SD
I would recommend this program to my friends and co-workers. Comments:	SA	A	D	SD
I feel the handouts were helpful. Comments:	SA	A	D	SD

What changes would you suggest to make this program better?

*Breaks every 45 to 50 minutes*

What is your overall evaluation of this program?

Excellent      Good      Fair      Poor



Dear Law Enforcement Administrator:

The National Institute of Justice has awarded the Tennessee Sheriff's Association a grant through the Law Enforcement and Family Support demonstration project. This grant #FS-VX-0005 will fund an eighteen month research study for all law enforcement officers in Tennessee. This is the largest grant ever awarded in their history for this type of research. The state of Tennessee now has the opportunity to make law enforcement history in that we can develop a model stress reduction program for officers when they become involved in a critical incident and need assistance.

This grant will allow Tennessee to set up three different models of stress reduction programs across the state to see which model provides the utmost help for Tennessee law enforcement officers and their families. This will be a program of Tennessee Cops taking care of Tennessee Cops and we need your assistance in getting the program to work. During this month, we will be recruiting officers from across the state to train in Basic Critical Incident Stress Debriefing Techniques. These officers, when selected and trained, will then become members of a CISD team to respond to an agency where an officer or department has experienced a critical incident that can effect their ability to function in a normal manner during or after an incident.

We are requesting your assistance in helping us get this information out to all officers who feel they want to help other officers when the need arises. PLEASE POST THIS FLYER ON YOUR BULLETIN BOARDS AND ANNOUNCE IT IN ROLL CALL SESSIONS so that everyone can receive the information. Also enclosed is a copy of our application for each officer interested in becoming a CISD team member. IF YOU COULD PLEASE PHOTOCOPY ENOUGH OF THESE FOR THOSE OFFICERS WHO WISH TO APPLY, it would be greatly appreciated.

I cannot stress enough how important this program is to all law enforcement officers in Tennessee and their families. Your support in this project will go down in law enforcement history as one of the greatest accomplishments of all times. This is just the start of great things for Tennessee Law Enforcement.

Thank you in advance for your efforts. I look forward to working with each and every one of you in the future to make law enforcement better in Tennessee.

Sincerely,

XXXXXXXXXX

L.E.A.F.S. Program Manager

2815 Patriot Way • Nashville, TN 37214-3541 • Tel: 615-884-1259 • Fax: 615-885-5785

This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.



# Tennessee Sheriffs' Association, Inc.

2815 PATRIOT WAY • NASHVILLE, TENNESSEE 37214-3541

TELEPHONE (615) 885-7511

FAX (615) 885-5785

Dear Law Enforcement CISD Team Applicant:

EXECUTIVE DIRECTOR

BILL THOMAS

The Tennessee Sheriffs' Association, Inc. has been awarded a National Institute of Justice Grant Award # 97-FS-VX-0005 for Law Enforcement and Family Support services. The Tennessee Project, known as "L.E.A.F.S." is currently looking for sworn law enforcement officers from various agencies throughout the state to serve as CISD team members. The services and training provided under this grant are available to every law enforcement agency and their personnel in the state of Tennessee. There are 90 volunteer positions available to serve as debriefers.

It is a well-known and accepted fact that law enforcement officers often work in traumatic situations, many of which may be life threatening for the officer, other public safety professionals, or the public. As a consequence, the officer may be impacted in a number of ways, affecting the officer personally and professionally, the agency and the officer's family. A process known as Critical Incident Stress Debriefing (CISD) has been shown to decrease the impact of such incidents both short-term and long-term. To be effective, the CISD is conducted by a team, which includes specially trained peers (other law enforcement officers and mental health professionals). Both mental health professionals and law enforcement team personnel form a pool of CISD Team members from which Response Teams are developed and activated. This training program is designed to provide officers with the background, theory, and skills required to be a valuable part of a CISD team. It exceeds the curriculum required by the International Critical Incident Stress Foundation, and addresses issues specific to law enforcement.

#### Qualifications and attributes required:

1. Sworn law enforcement officer
2. Commitment to program goals and an interest in the general welfare of law enforcement officers and their families
3. Ability to plan and organize
4. Ability to communicate with people on a personal level
5. Ability to maintain impartiality and neutrality (non-judgmental)
6. Ability to maintain confidentiality
7. Proven interpersonal skills
8. History of productive relationships with fellow officers
9. Skills as a good listener
10. Flexibility and willingness to respond to critical incidents on a rotational schedule within their geographical region
11. An eighteen (18) month commitment to service as a CISD Team member

The training for those selected as members of the CISD teams will be held at the Tennessee Law Enforcement Training Academy for officers from East and Middle Tennessee on May 1-3, 1998; and officers from West Tennessee will attend on May 15-17, 1998. Lodging will be provided at the Academy, and reimbursement for meals will be made at the completion of the last day of training at \$24.00 per day.

Please fill out the attached application in its entirety and return (along with any supporting materials) by March 27, 1998 to:

XXXXXXXXXXXX, Program Manager  
Tennessee Law Enforcement And Family Support Project  
2815 Patriot Way  
Nashville, TN 37214-3541

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

*Leadership in Law Enforcement*

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT**  
**(L.E.A.F.S.)**  
Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**CRITICAL INCIDENT STRESS DEBRIEFING TEAM**  
**MEMBERSHIP APPLICATION**

**LAW ENFORCEMENT PEER DEBRIEFER**

**1. PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
Employer: \_\_\_\_\_  
Work Address: \_\_\_\_\_

**2. EDUCATION -- List most recent first**

<u>Institution</u>	<u>Program/Major</u>	<u>Date</u>	<u>Degree/Certification</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**3. EMPLOYMENT INFORMATION -- List most recent first**

<u>Place</u>	<u>Job description/Responsibilities</u>	<u>Length of employment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4. MEMBERSHIP IN LAW ENFORCEMENT ORGANIZATIONS**  
(List names and dates)

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**5. PARTICIPATION IN COMMUNITY ACTIVITIES**  
(List names and dates)

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**6. SUPPLEMENTAL INFORMATION**

List and describe any formal training you have received in stress management, crisis intervention, post traumatic stress disorders, counseling, etc. List and describe any related workshops or conferences.

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**7. Comments or additional information you would like us to have about you to aid in the CISD Team selection process:**

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8. How much flexibility do you have to go on a debriefing on a 24-48 hour notice?

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9. List stress management techniques you have utilized effectively:

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10. List three (3) personal references that can attest to your work in law enforcement or could support your role on this team:

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**PLEASE RETURN THIS APPLICATION TO:**

Paul E. Jennings, Program Manager  
Tennessee Law Enforcement And Family Support Project  
2815 Patriot Way  
Nashville, TN 37214-3541

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database**

Please print the requested information below and attach your current CV, a copy of your current license and your malpractice insurance face sheet. Please PRINT or TYPE legibly, using BLACK ink, since your application form will be scanned into a computer. Thanks.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: (circle) Ms. Mr. Dr. Social Security #: \_\_\_\_\_ Degree: \_\_\_\_\_

Office Address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

1. Are you licensed or certified in the state of Tennessee?  Yes  No
2. If yes, licensed/certified as a \_\_\_\_\_ License # \_\_\_\_\_
3. When does your current license expire? \_\_\_\_\_
4. Do you maintain Professional Liability insurance with a minimum coverage of \$1 million/\$3 million?  Yes  No
5. What is the date of expiration of your current Professional Liability policy? \_\_\_\_\_
6. Is it generally possible for you to schedule an appointment with a program participant within 24 hours?  Yes  No
7. Do you have a sliding fee scale?  Yes  No
8. Do you presently have time available to accept law enforcement referrals?  Yes  No
9. Are you affiliated or have privileges with any hospital, treatment center or group practice, and if so, where?  Yes, \_\_\_\_\_  No
10. Do you have professional experience working with or providing services to law enforcement personnel?  Yes  No
11. Are you currently or have you in the past, contracted with or provided services to any law enforcement organization or agency, and if so, in what capacity?  Yes, \_\_\_\_\_  No
12. Are you qualified to perform Fitness for Duty evaluations on police officers?  Yes  No
13. Are you interested in joining a special team of clinicians who will be available for emergencies at **ANY time** of the day or night?  Yes  No
14. Identify up to 3 areas of specialization for your 1998 listing, (enclose supporting documentation, if any):  
1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**For Office Use Only:** CV:  LIC:  MALPrac:  Re-interviewed:  Yes  No By: \_\_\_\_\_

Accepted 1998:  Yes  No Reason: \_\_\_\_\_ Date: \_\_\_\_\_

Added to 1998 database  Date: \_\_\_\_\_ By: \_\_\_\_\_

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database (Con't.)**

For the following questions, please attach a complete written explanation for any "yes" response:

1. Have you ever been convicted of a felony?  Yes  No
2. Have any malpractice claims ever been made against you including claims currently pending, claims that have been settled or claims that have resulted in judgments?  Yes  No
3. During the past 10 years, has any professional organization or regulatory board declared any actions by you to be unethical, or are you currently under investigation for any actions of unethical conduct?  
 Yes  No
4. Have you ever testified in a court of law against a law enforcement officer?  Yes  No
5. Has your professional license in this state or any other state ever been revoked, suspended or limitation imposed or have you been subject to any other disciplinary action by a public agency, insurance company or professional organization?  Yes  No

Please list the primary insurance companies that are available and that our program participants may utilize. Please indicate whether or not you are currently an in-network participating provider for any of the following programs:

<i>Program Name</i>	<i>Type of Program</i>	<i>Are you IN-Network?</i>	<i>Provider ID Number</i>
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**ALL MATERIALS MUST BE RECEIVED NO LATER THAN XXXXX XX, XXXX!!!!**

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

This document is a research report submitted to the U.S. Department of Justice. This report has not been published by the Department. Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

**1998 Law Enforcement and Family Support (L.E.A.F.S.) Clinician Database (Con't.)**

In the space provided below, list any additional insurance companies for which you are authorized as a provider. Indicate if you are IN or OUT of network. Also, indicate if you are willing to accept assignment.

<i>Program Name</i>	<i>Type of Program</i>	<i>Are you IN-Network?</i>	<i>Will you accept Assignment?</i>	<i>Provider ID Number</i>
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
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		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		

*Return your completed application along with all supporting materials to:*

XXXXXXXXX  
 Law Enforcement And Family Support Project  
 XXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXX NY XXXXX-XXXX

*Incomplete applications will not be processed. Please make sure you have enclosed the following:*

- This application - filled out completely
- A copy of your current Tennessee license/certification
- A copy of your Professional Liability Insurance face sheet showing limits of \$1 million/\$3 million
- A copy of your current Curriculum Vita (Resume)
- Copies of any specialty certification, e.g. ABPP, AAMFT Clinical Membership, CAC, etc.

If selected for consideration, you will be contacted by a representative of the L.E.A.F.S. Program with dates and times of interviews. If you have any questions, please call XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX.

**ALL MATERIALS MUST BE RECEIVED NO LATER THAN XXXXX XX, XXXX!!!!**

This program is funded by the National Institute of Justice Law Enforcement and Family Support Grant Award # 97-FS-VX-0005. Women and minorities are encouraged to apply.

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Dear :

I take great pleasure in advising you that you have been selected as a team member of the Law Enforcement and Family Support project, and to receive training in Basic Critical Incident Stress debriefing for law enforcement.

The three-day training course will be offered twice, Friday, April 17 - Sunday, April 19<sup>th</sup>, and again on Friday, May 1 - Sunday, May 3<sup>rd</sup>.

Ninety (90) law enforcement officers and thirty mental health professionals have been selected from throughout the State of Tennessee to participate as team members and have been contacted by phone as to your prospective training dates. You should report no later than 0730 hours on Friday of the training dates you have chosen or been assigned. Training will begin promptly at 0800 hours each day and end at approximately 1600 hours (8 a.m. - 4 p.m.) Lodging will be provided for those participants requiring it, at the Tennessee Law Enforcement Training Academy on Friday and Saturday evening. Meals are on your own and a meal allowance of \$24.00 (state reimbursement rate) at the conclusion of training on Sunday.

Please call as soon as possible if you have a schedule conflict with these dates.

Enclosed, please find the Mental Health Professional team member position description and a Memorandum of Understanding along with a map and directions to the Tennessee Law Enforcement Training Academy at 3025 Lebanon Road, Nashville.

Thank you for your interest and support and willingness to dedicate your time for this cause.

Sincerely,

XXXXXXXXXXXX  
Program Manager

enclosures

2815 Patriot Way • Nashville, TN 37214-3541 • Tel: 615-884-1259 • Fax: 615-885-5785

This project was supported by Grant No. 97-FS-VX-0005 awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice.

**TENNESSEE LAW ENFORCEMENT AND FAMILY SUPPORT PROJECT  
(L.E.A.F.S.)**

Funded by the National Institute of Justice Grant Award # 97-FS-VX-0005

**MEMORANDUM OF UNDERSTANDING**

I, \_\_\_\_\_, the undersigned agree that if I am selected as a member of the Tennessee Law Enforcement And Family Support Critical Incident Stress Debriefing Team, I will serve as a volunteer team member for a period of eighteen (18) months. I understand that serving as a team member requires the following commitment and obligations:

1. Attendance and full participation in the three (3) day Basic Critical Incident Stress Debriefing training
2. Attendance at additional training sessions as may be required.
3. Completion of cross training as may be required.
4. Attend scheduled team meetings (approximately every 6 weeks)
5. Complete any required records or paperwork
6. Revocation/suspension of my membership will occur under the following circumstances but is not limited hereto:
  - A. If I fail to maintain strict confidentiality regarding Critical Incident Stress debriefings held, including topics discussed and personnel involved. Any breach in confidentiality will result in immediate removal from the team and the program.
  - B. If I fail to follow all local protocols and directives regarding L.E.A.F.S. activity
  - C. If I organize or in any way attempt to organize a debriefing without the Program Manager having prior knowledge and approval.
  - D. If I organize or in any way attempt to organize any Critical Incident management activity or program without the Program Manager's prior knowledge or approval
  - E. If I go to the scene or place of an incident to act on the behalf of the L.E.A.F.S. program or the Team without the prior knowledge or consent of the Program Manager
  - F. If I fail to be present at an assigned debriefing or activity when I have made a commitment to do so
  - G. If I act against the expressed direction of the Program Manager or Clinical Advisor
  - H. If I misrepresent the affairs or operations of the L.E.A.F.S. Program
  - I. If I am habitually or continually absent from scheduled Team meetings

I understand that being selected to attend the preliminary training session does not insure me a position on the team or within the program.

The Law Enforcement And Family Support Program agrees to provide the following:

1. Continuing training of current research, findings and theories of law enforcement occupational stress and related topics
2. Critical Incident Stress Debriefing training certified by the International Critical Incident Stress Foundation. To guarantee attendance of the three (3) day Basic CISD Training, there will be a registration fee of \$125.00, payable in advance, to hold your space in the class. This amount is immediately refundable upon completion of the training. Candidates who fail to attend will forfeit their registration fee. The L.E.A.F.S. Program will provide me with the dates and times of training sessions to be offered.
3. Administrative support
4. Debriefing for the Debriefing Team members after a CISD when necessary or requested.
5. Reevaluation of team operations and personnel every six months
6. Maintenance of quality standards in performance and confidentiality in personnel (team members), and operation
7. CISD Team Member identification for each team member.

I have read and understand these commitments and obligations and will agree, if selected, to serve as a volunteer for the L.E.A.F.S. CISD Team and to abide by all protocols.

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Signature

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Date

**CRITICAL INCIDENT STRESS DEBRIEFING TRAINING**  
**Course Critique**  
**SESSION 1 – APRIL 17 - 19, 1998**  
**DAY 1 – Peter Cove, Instructor**

**1. Briefly state what you learned at this school.**

- Think before you do anything.
- Work stress is significantly higher for law enforcement. They love their jobs, but many leave the profession because of stress. Law enforcement officers have by and large bought into the Big Lie that they must not and cannot say anything about their feelings to anyone.
- Causes and effects of stress. Seriousness of traumatic stress if left untreated; importance of peer support groups and debriefings.
- The gap that exists between the mental health and law enforcement communities. Much of first day was review but still important to hear again.
- A much greater insight into the real-life experience of a law enforcement officer and the impact to the critical incidents on him/her and families.
- What I learned on day one was enormous. One of the primary facets was that anyone is susceptible to the pressures of stress. The course also taught that being judgmental is a natural reaction and we must be more aware of our reactions to others. The course taught many more aspects of police stress. The course also taught that it is OK for officers to open up.
- Not to judge others or second guess their decisions. Be there to listen to what they have to say.
- Lots of behaviors are normal and should not be judged as good or bad. People who have been involved in a traumatic incident need a non-judgmental person to listen to them - sometimes a peer is enough, sometimes MH professionals are needed. It's OK to express your emotions.
- The first day of the course was for me in 2 stages: I was attempting to turn my past knowledge around. The second part I learned what happens to other officers involved in stressful situations was very similar to my experiences and that my feelings were very normal.
- How better to feel "normal" in a multitude of situations
- Law enforcement officers do not receive the emotional help needed in critical incidents.
- Enhanced personal knowledge of interactions between law enforcement profession and increased potential for psychological trauma.
- How to assist fellow officers and what to look for as to stress and some of the courses.
- I learned things I knew, but didn't actually realize. Such as police culture teaches officers to push down or hide their emotions and that this is a normal reaction for human beings. However, police officers are taught this is abnormal, and that police officers must learn to express their feelings through other officers in order to decrease negative effects of police related stress.
- This course is directed toward cops helping cops recover from stressful incidents without the traditional suppression of emotion.
- More ways to talk about and deal with stress.
- Suppressed feelings can be very hard to overcome. Debriefing can overcome.
- I learned that a main key to emotionally/mentally/physically surviving critical incident in law enforcement is positive peer support.
- It is much more healthy for you to express your feelings other than to suppress them. That is normal not abnormal. Talking about our problems is a very healthy thing for officers to do for each other.
- Law enforcement is one of the most stressful occupations coupled with critical incident. It can be overwhelming without support from someone. Do not second guess or judge someone's actions. You truly do not know how you would perform until you are involved in a situation.
- I learned about Peter Cove's struggles with alcoholism. I also learned the premise behind the CISD is that cops can only relate to cops. I think we need to work on that sub-culture and try to change it for the future.

**Peter Cove**

- That we have a tendency to critique events, we have a tendency to second guess the officers. We need to learn to be there for them.
- Police stresses, methods of debriefing.
- Law officer's perspective, issues and range of experiences encountered.
- Learned the difference between judgments, observations and natural responses.; being there for your fellow officer involved in an incident; emotional therapy.
- The first day of class was very informative. Learning to feel and make less observations will assist me in helping others. I also learned how important it is to listen and not make judgments such as "could of" "should of" " would of". It has taught me to talk more and be more open in relating to others.
- Learned how stress effects people. How to deal with stress. Who stress effects.
- What shoot teams are; what police officers feel; how some handle the pressure of law enforcement. I do/see/feel/act the way you do and the ideas you teach. but/and I understand how somebody could feel the way with out training (combat).
- I learned several things during this school including changes that I need in my attitude and home life. I also learned of services that are available for officers.
- It is more important to listen and just be there, instead of offering my opinion. Do not make judgments.
- This instruction provided me a better understanding of how wide spread traumatic events (that are not addressed) are. Instruction learned --Fundamentals of CISD.
- How to treat others in critical incidents, not to second guess. Not to be judgmental. Learned more about how people act and react under different circumstances. How to deal with stress.
- Think before you do anything.
- The need of my fellow officers is more I thought, the things that I have lived with for the past several years are common with people who have been involved in critical incidents.
- A better understanding of stress and how it effects law enforcement officers both physically and emotionally. Techniques used in debriefing to help relieve some of this stress.
- What the importance of debriefing and taking the time to go per say one on one with officers involved in a critical incident for the officer and family so they can continue with the job in law enforcement.
- I got an overall understanding of how complex the problem of critical incident stress is. I also learned that it is a nationwide problem and that we need these types of things to help people through these hard times.
- I was happy to learn that there are shoot teams formed to assist officers with incidents either past or present.
- The various aspects of the presentations of stress symptoms - specifically to law enforcement. The statistics that support the data.
- The influence and daily stresses that have changed me personally and effected me personally and job performance. Also how to identify the stresses on myself and others.
- We learned about how stress effects police officers. We were given statistics and saw videos showing examples of stress. We participated in class discussion of stress. I learned that we tend to judge our own. Reviewed the Mitchell model and phases of stress.
- A lot about myself in regard to how I deal with stress.
- There are a great number of emotions that may take place after a critical incident. Many times this becomes masked by anger and covers the real underlying problem. The goal of CISD is to get the officer ready to return to the job. This is done with the use of shoot teams that use the CISD program to debrief the officer and possibly bridge the gap between that officer and a mental health professional if it is needed.
- That the job and life style of police work can kill you more ways than one. That is very important for cops to help cops.
- CISD offers a win-win approach to both officers and police departments by preventing burnout and preventing the loss of officers through alcoholism, depression, burnout and suicide. It needs to be offered on a mandatory basis. but accumulated stress counseling needs to be offered on a voluntary basis. The team approach draws upon the skills of the mental health professional merged with the experience of the law enforcement personnel. MH
- Law enforcement is more stressful than most people know. More officers suffer from physical and mental problems than the average. Providing opportunities for sharing experiences and ventilating reduces these problems.

- One of the best things to do is listen more than to talk. Be there to listen to be there for other officers.
- Officers by occupational nature are judgmental and have sever "arm chair quarterback" syndrome. This class brought the mindset to the surface and has helped me to recognize this and deal with it.

## **2. How will this assist you in the performance of your duties?**

- As a shift team supervisor and a 25+ year veteran, my experiences in surviving critical incidents accompanied by this training can be used to help other officers and myself survive a critical incident.
- I knew most everything I heard today. However, listening to police officers and being around them was very beneficial. My husband is a former police officer (11 years active service), so I understand police officers some. I will use my understanding and training to help police officers and their families to deal with the stress of their lives.
- It will help me relate to others and show compassion while still doing my job. But above all, just to constantly remind me that I'm not alone in the stress that I feel.
- I think it opened my eyes to how to start in assisting someone in CISD.
- I will be more sensitive to officer's feelings after being in a critical or traumatic incident.
- Focus more effective interventions.
- More able to recognize and assist others involved in critical incidents who believe they are "ok".
- As a supervisor I need to change my approach when my officers are involved in incidents. I need to take care of them, their needs and emotions. I can let others critique or second guess or after we take care of the officer in a few days we can look back for a critique.
- As a captain, it will help me to determine some signs of stress with my deputies and address that and help them talk through some of their problems.
- I will be able to help and understand what other law enforcement officer might be going through to be able to instruct those other officers in a good networking program.
- Empathy to officers and an understanding of the CISD goals and techniques.
- This will enable me to more quickly recognize problems in my fellow employees and to assist them in coping with their problems.
- Awareness of indicators of stress is an important tool to have in any work situation.
- Much higher level of sensitivity and how to avoid adding more stress.
- This will definitely make me more aware of other officers experiencing various degrees of stress. The training will also provide me with more knowledge of how I can assist my fellow officers with stress management.
- As a supervisor it will help me be more in tune to their feelings and to listen more when they have problems. It has reminded me of the needs of others for a non-judgmental listener, that people mask their true feelings (often with anger) and people react differently during situations and afterward.
- First it will aid me in understanding what my fellow officers are going through and what to advise them in areas of stress and how to steer them to areas they can be helped.
- Be more sensitive and compassionate.
- More sensitive, concerned.
- More consciously aware of the need to support fellow officers in all aspects of duty performance.
- To recognize the stress within the officers and how to assist them in the future.
- It will assist myself in personal evaluations of myself. It will help me identify and or assist personnel in my department who would need assistance before, during and after critical incidents.
- It will enhance my abilities to help officers who are also members of the citizenry as well as all members of the public community.
- By helping those around me every day and dealing with every day life.
- Being able to vent can help cope with the stress better.
- I can take the material back to my department and use it to benefit myself and fellow officers dealing with stress and provide information to a network of friends throughout the state that do the job and experience the same stresses.
- Once this training is department wide, I am hopeful the effects of stress will become more manageable.
- I believe the changes in attitude will assist me in dealing with the public, other officers as well as myself.
- Hopefully, I will be able to help others, especially my fellow officers in critical situations by using what I've

- learned in this course. I should have better organizational skills that will make me better prepared.
- My job requires a lot of listening skills. I find it also important to protect "victim" officers from those who "will not" be sensitive.
- It will help me to relate to others and assist them in critical incidents. They need to be heard, do not need praise, need to be encouraged.
- I will be able to assist other officers who have had stressful events in their life.
- It gives me a better understanding of the underlying problems every law enforcement officer has to face every day.
- A better understanding of my fellow officers rather than being so quick to second guess them in the event of a future critical incident within my department or another.
- It clarified some of the day to day situations that we overlook so we can address what other officers.
- I feel I will be able to assist other officers with coping with stressful situations not only shooting but any other critical incidents that may be part of their lives.
- Better understand the daily stresses of the profession and the influences that cause the slow deterioration of personal and professional behavior. As a supervisor and potential CISD counselor, it will help me in identifying the needs of others and provide intervention when needed.
- Knowledge and awareness of issues and potential issues
- This will help me to better understand what officers go through when involved in critical incidents. It will help me to debrief officers.
- I think that I will be more sensitive to people I work with on a daily basis.
- It has given me a better understanding of the feelings that officers go through, and what needs to be done to return that officer to the streets so they can effectively do their job.
- It will make me feel more comfortable in trying to help those who need it. It gives a guideline to help get the points across.
- Help me to relate and offer "objective" listening skills.
- I plan to interface with police, fire, hospital and industry contacts to bring the CISD team concept to a larger segment of the community. I work closely with 7 police departments and will serve as a resource for all of them. I hope that this training will enable me to become part of a CISD team. MH
- Not only will this help me in relating better with law enforcement personnel but can be used in many areas of my work. MH
- Not only better listen to cops but also other people on the street and my family.

### **Are there any topics which you would like to see added or would like to have more emphasis placed upon?**

- I'd like to see training of an anger-management for officers - something I do in my private practice.
- The family component of this whole process is extremely important. In my situation the family healing is a much longer process than the individual officer healing.
- Stress from the agency itself.
- Without knowing the courses for the rest of the weeks, I cannot comment on what else is needed.
- Break the bonds of the sub-culture.
- It was very well covered.
- Some social interaction/networking opportunities.
- As a mental health professional, I wondered if these law enforcement officers would be able to relate to me. I saw how much they relied so much - almost only - on fellow officers. I am an outsider. I must gain their confidence. How will I do this and how will they learn to open up to an outsider?
- The I'm OK - you're OK theory. It's OK to be "normal".
- For now this is enough to absorb.
- Domestic violence intervention to assist officers and their families.
- Greater emphasis of family support and support systems.
- The use of similar programs to work with officers who may not have been involved in a critical incident but are suffering from stressors stemming from personal or job related problems.

- Family component, which would assist officers family members to cope with the stress following a critical incident of which their spouse was involved in.
- What I can see as of now the training is right on track as all training will always continue to educate on this subject.
- Would like to have learned more about others feelings in relationship to videos and scenarios. And maybe more emphasis on "it's OK to feel this way".
- The inherent personality differences between police and mental health personnel is important to review. Some team building exercises would be helpful. Small group discussions would also be helpful. MH
- This is new to me and I can't really say what more emphasis should be placed on. This is so far the best training I have had in 7 years of law enforcement.
- Law enforcement stressors; Affects of officers involved shootings on the family; handout on some of the statistics on officers and the related studies.
- No
- At the beginning; How the mental health professionals fit in.

#### **4. What are some schools/programs you would like to see offered in the future?**

- The school offered to more officers as it becomes available.
- More of this type of schools. Stress is a killer that we (as a group) know little about and are not readily eager to talk about.
- I would consider it a privilege to participate in teaching anger-management to officers and Death and Dying - How to make meaning and make peace with it. Judith Humphreys
- A program that explains to new officers and their families the risk that comes from police work. Most people do not believe that these types of things happen to them.
- Maybe school for officers to train mental health professionals on what the issues facing officers really are.
- A class for in-service that encourages officers to use counseling services available.
- Extended courses on police officer alcoholism and drug abuse.
- Psychological profiling.
- More family classes as for dealing with what their father/mothers husbands/wives and how the family will have to deal with as this critical incident with their spouse/father/mother.
- Additional training along this line.
- Specific issues for families, spouses, children, parents, etc.
- Family problems. How to treat the spouse and kids. Not only the officer
- More psychological learning programs. There should also be training in the police Academy. To let officers know this is available and to make them aware they are not excluded from the inevitable in police work.
- Family targeted.
- Classes on critical incidents that aren't necessarily "shoot" related.
- An instructors course so that we might be able to work with and teach our officers to better handle stress.
- Hostage Negotiations
- A course and/or material designed to supervisory level personnel so that they may have a better understanding of the debriefing/shoot team and what benefits both present and future are obtained.
- Some advanced training offered would be helpful in the future.
- Make communications course to help the officers express their ideas and feelings.
- Follow-ups and evaluations of CISD
- Restoring psychologically or physically impaired officers to duty. This could be offered in conjunction with the TN Division of Rehabilitation Services.

#### **6. What was the most outstanding feature of this training?**

- Care and concern of officers.
- When class members learned that there were actually shoot team members in class.
- Video involving the 3 on duty officers and 1 off duty officer.

- This training was new to me. Everything was very good all fresh.
- Overall very good
- Videos of actual incidents
- Peter Cove's delivery
- It was all great and informative.
- Motivated speaking
- The skill/expertise and information of presenters and their sensitivity.
- Videos - it gave you a feel of hands-on training
- Dynamic presentation
- Group participation.
- The openness of the instructors and students.
- Teaching - video The video puts in the action.
- Group discussion
- Mr. Cove's personal belief in the program and its ability to work.
- The visual aids used made one feel that they were there. I also think it is important for this team to consist of officers that have been "victim" officers.
- The stories and to actually see how it effects them.
- Quality of instructor and ability to use personal experiences to aid in training.
- Being able to learn with fellow officers who have experienced trauma and survived.
- The knowledge that each instructor brought to instruct by experience.
- When the overall class members learned they were in a room full of people that had been there.
- Audio video and lecture
- Up front dealing with big issues.
- Life experiences of members in class and instructor.
- The video on the actual shooting of an off-duty officer involved in a domestic. Also good experienced instructors.
- Group participation
- The life experiences of the instructors that they shared with the class.
- The material covered and the instructors delivery technique was outstanding.
- Engagement and issues covered
- Training the mental health and police personnel together.
- Training Officer
- Letter Information
- The instructors
- The skill, energy and wisdom of the trainer.
- I opened my eyes to a silent and ever present cop killer.
- The way the instructor was able to share his feelings.

### **What future changes, if any, would you recommend for this training?**

- A reminder to officers of the "fun" part of the job, not as much beating down on how bad life is.
- Use of microphones by speakers at all times.
- You do a super job, no changes known.
- During week - not on weekend
- Clarify the objective of the training up front.
- Perhaps some stress testing with personality profiles.
- Require/encourage mental health professionals to stay in the dorm with the officers.
- Maybe not on a weekend
- Motel rooms instead of the training academy dorms. Maybe offer the training during the week on week days instead of the weekend.
- Need more time to cover material thoroughly.

### **Additional comments you would like to make:**

- Very informative class, just too much material crammed into too little time.
- Absolutely great training. Peter Cove is excellent.
- Great school
- Brief the TO's on what the course is about.
- Truly enjoyable experience
- Outstanding material.
- In just the first session, I was able to bring up some old baggage of things I've experienced.
- Excellent potential to bridge a gap that has long existed.
- This was without a doubt the best and most interesting day of a course I have taken.
- I would like some information on the affects to the officer's family.
- I would like to thank everybody who has a part in this program. This is the best program to be developed to help and work with Tennessee law enforcement officers and their families.
- I enjoyed every aspect and I want to get more officers from my area involved.
- I would like for training to continue to change the mindset that real men don't cry or show emotion. That will be a long time in evolving.
- Make something for the atheists; agnostic believers.
- Glad to see this training available. I wish we had this twenty years ago.
- I appreciate being selected for this training and believe it will be successful. I hope that even when the grant runs out, this team is retained.
- Thank you for my debriefing.
- Excellent content and format
- Needs tables. Would be helpful for writing.

### **Additional Comments. Please include comments on the best part of the class and the part of the class that needs improving.**

- The class is great. Peter is very educated on the subject matter, and it shows during his presentation. Thanks for the opportunity to attend this class.
- Peter is a very open and good instructor.
- Enjoyed the class. The videos were good.
- Excellent lectures
- Informational correspondence should be sent to department first line supervisors (personally addressed) so that they may have a better understanding of this outstanding state wide program. Old school methods of operation are not always good. This is such an outstanding program that I feel at least the structure/purpose/benefits should be shared with first line supervisor. It can only create more support of a very worthwhile program.
- Outstanding presentation and content.
- There needs to be more discussion time.
- Stories were teaching; but do good stress relief techniques. Bring to light other ways that I can use to help.
- The best part of the class is that watching videos as a group and expressing feelings makes you feel a bond with everyone in the room. Again the class was very informative but regular breaks are needed. The problem is too much material and too little time.
- None to make but great class and gathering of law enforcement with concern for helping law enforcement.
- Thank you for getting me back to "near" normal. Please keep up the effort.
- As I stated previously, this is more than adequate training. The only feeling I had yesterday was a sense of inadequacy in that because I have not been involved in a "shooting" incident, will I be qualified to debrief a fellow officer. I will lean on the relative feelings and emotional support that I can offer in support of the affected officers. Peter - I thoroughly enjoyed your teaching techniques.
- Peter serves as an excellent role model to show officers how to break through the denial process to reveal feelings and to address personal flaws or characteristics. A few of the statistics that he quoted seem extreme and may need corroboration from independent sources.

- Instructor quality, especially in the application of personal experience to communicate vital points, is the greatest asset. No low points.
- Makes you think about a lot of your tough subjects.
- Best respect shown the students for their selection for the program. The dorms could be upgraded for comfort.
- A great instructor who should continue.
- Excellent material and presentation. I am very impressed with material the way it was presented and especially the instruction.
- A little more emphasis on the joys of policing - some officers already have too much of the "woe is me" attitude. Lighten up a little; law enforcement is our choice not our sentence.
- Very effective, powerful presentation and significant use of self-disclosure. It would be very helpful if participants could be given access to meals on site.
- Pretty good class

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